

ALLOCATION OF REQUIRED WORK CREDITS

In accordance with subsection 83(1) of The Mines and Minerals Act

PLEASE PRINT

Name of Holder

Address

City Province Postal Code

Contact Name

Telephone No. Fax No. Email

If the holder is not a resident of Manitoba, the name and address of a resident agent must be supplied.

Resident Agent

City Province MANITOBA Postal Code Telephone No.

Group Certificate Number	Area in hectares	Applied Against Claim Number & Name	Work Performed on Claim/Lease Number & Name	Amount Applied	Amount Applied to Recover Cash Deposit	Total Years Applied For	Filing Fees

Additional allocation may be made on the reverse.

The required work credits are to be applied to the claims as shown above.

Date

Applicant/Holder

- NOTE:**
1. A fee of \$13.00 per claim per year applied for must accompany this application. Make cheque payable to the **Minister of Finance, Manitoba**. (Fee **NOT** required for Mineral Lease or Mineral Exploration Licence)
 2. This form may be used to allocate required work from credits or under a group certificate.

Application to be filed at the Office of the Mining Recorder:

WINNIPEG
 Unit 360
 1395 Ellice Avenue
 WINNIPEG, Manitoba
 R3G 3P2
 Phone: (204) 945-6527
 Fax: (204) 948-2578

FLIN FLON
 Barrow Building
 Room 201, 143 Main Street
 FLIN FLON, Manitoba
 R8A 1K2
 Phone: (204) 687-1630
 Fax: (204) 687-1634

OFFICIAL USE ONLY

Cheque/Cash/Auth No. _____

Amount _____

Payer _____

First File _____

Date _____

Receipt No. _____

Amount _____

