

APPLICATION FOR BOREHOLE LICENCE

(In accordance with section 5 of Drilling Regulation, MR 63/92)

NAME:

CONTACT PERSON: TELEPHONE:

ADDRESS:

CITY/TOWN: PROVINCE: POSTAL CODE:

EMAIL:

Description of Drilling Plan:

No. of Drill Holes:	<input type="text"/>
Drilling Depth:	<input type="text"/>
Core Size:	<input type="text"/>
Expected Starting Date:	<input type="text"/>
Expected Completion Date:	<input type="text"/>

NTS Map Sheet:

LEGAL DESCRIPTION OF PROPERTY: * Attach map or sketch showing proposed drill site.

Geographic Coordinates OR	Section	Township	Range	WPM/EPM
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Provide name and address of the surface rights owner if other than the applicant.

NOTE: SECTION 154 OF THE MINES AND MINERALS ACT STATES THAT NO PERSON SHALL ENTER UPON, OCCUPY OR TAKE THE SURFACE OF PRIVATELY OWNED CROWN MINERAL LAND FOR MINING PURPOSES UNLESS THE PERSON HAS WRITTEN AUTHORIZATION TO DO SO FROM THE OWNER OF THE SURFACE RIGHTS TO THE LAND AND WHERE APPLICABLE, FROM THE OCCUPANT OF THE LAND, OR BY ORDER OF THE MINING BOARD IN ACCORDANCE WITH SECTION 29.

DECLARATION:

I declare that the information provided on this form is accurate to the best of my knowledge, and that the authorized drilling program will be in compliance with all terms and conditions as may be imposed in the Licence(s).

Enclose application fee of \$34.65 (includes GST). Make cheques payable to The Minister of Finance.

Date

Signature of Applicant

Application to be filed at the Office of the 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

Email: mines_br@gov.mb.ca

Website: www.gov.mb.ca/iem/mines/imaqs/index.html

OFFICIAL USE ONLY

Cheque/Cash/Auth. No. _____

Date _____

Amount _____

Receipt No. _____

Payer _____

Amount: _____

Client No. _____