



Energy, Mines and Resources
Oil and Gas Management Branch

NOTICE OF DESIGNATED REPRESENTATIVE, REPLACEMENT, OR REVOCATION

Department File # _____

To: **Rights Disposition Manager**
Oil and Gas Management Branch
Department of Energy, Mines and Resources
Suite 300-211 Main Street
Whitehorse, Yukon, Y1A 2B2

Phone #: (867) 667-3512
 Fax #: (867) 393-6262
 E-mail: **oilandgasdisposition@gov.yk.ca**

Date Received: _____
D / M / Y

Registration No. _____
Date Registered _____
D / M / Y

DO NOT WRITE ABOVE THIS LINE. FOR DEPARTMENT USE ONLY.

A. Disposition (type and number) being affected by this notice: _____

B. Reason for Notice:

Designation of representative

Replacement of representative

Revocation of representative

C. Full name of former or revoked designated representative.
 Note: (Enter "NONE" if this is a new designation by a sole holder):

Full name of former or revoked designated representative

_____ Client I.D.

D. Full name of new or replaced designated representative.
 Note: (Enter "NONE" if this is a revocation by a sole holder):

Full name of new or replaced designated representative

_____ Client I.D.

E. Notice of Official Service Address attached.
 Note: if your address is already on file, do not resubmit.

F. Holders. To change the designated representative, all holders must sign the notice. If more space is required for signatures, copy this page. This Notice may be executed in counterparts, and all of the executed counterparts shall together constitute one Notice and shall have the same force and effect as if all the persons executing counterparts had executed the same Notice.

HOLDER'S FULL NAME	Client I.D.
Printed Name	Capacity
Signature	

This Notice is submitted pursuant to the *Oil and Gas Act S.8 and S.21* and the *Oil and Gas Disposition Regulations S.14*.