



**APPLICATION TO RECORD A
MINING CLAIM IN A SURVEYED TERRITORY**

Pursuant to subsection 24(1) of The Mineral Disposition and Mineral Lease Regulation, MR 64/92

I, _____
(Applicant)

of _____
(Address)

City _____ Province _____ Postal Code _____

Telephone No. _____ Fax No. _____ Email _____

declare that:

- I am the full age of eighteen years and holder of valid Prospecting Licence No. _____
- I herewith make application to record a Mining Claim, named _____ comprising _____ hectares in surveyed territory on the lands described as follows:

LS or _____ Section _____ Township _____ Range _____ EPM/WPM

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LS or _____ Section _____ Township _____ Range _____ EPM/WPM

Include all available road allowances within or bordering the claim. Please check one - Yes No

- A plan as required by the regulation is attached.
- To the best of my knowledge and belief, the land within the boundaries of this mining claim is not excluded from staking pursuant to Section 161 of The Mines and Minerals Act and contains no improvements except as indicated herein.

- A non-refundable fee of \$60.00 accompanies this application. (Make cheque payable to the **Minister of Finance, Manitoba.**)

If the claim is to be recorded in a name other than the applicant, please complete the following:

I direct that the holder of this claim be recorded as: _____

Address _____

City _____ Province _____ Postal Code _____

Telephone No. _____ Fax No. _____

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. _____ Fax No. _____

Applicant MUST sign:

Date

Applicant

- NOTE:**
- It is an offence under The Mines and Minerals Act to make a false statement on this document.
 - If the holder is a corporation, the corporation must be registered to do business in Manitoba.

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. _____

Date _____

Amount _____

Receipt No. _____

Payer _____

Amount _____

Claim No. _____