

APPLICATION TO AMALGAMATE THE AREA OF A MINERAL LEASE

PLEASE PRINT

I/We hereby apply to amalgamate the following Mineral Leases pursuant to subsection 41(1) of The Mineral Disposition and Mineral Lease Regulation, MR 64/92:

Holder(s)		Holder(s).	
Lease No(s).		Lease No(s).	
shown on Clain	n Map No(s)		
The holder of th	e amalgamated lease shall be: _	-	
Contact Person		_	
City		Province	Postal Code
Telephone No.		Fax No	
Enclosed is a c of Surveys.	ertified plan of survey of the perir	neter of the proposed mir	eral lease area, duly approved by the Director
	Date		Holder
If the holder is r	not a resident of Manitoba, the na	me and address of a resi	dent agent must be supplied.
Resident Agent			
		– Province <u>MANITOBA</u>	Postal Code
		Fax No	
Notes: 1 2. 3.	Rental for the first year must accompany this application. Make cheque payable to the Minister of Finance, Manitoba . If this application is signed by an agent, the authority of the agent must be filed with the Recorder. The holder's copy of the original mineral lease document must be submitted with this application.		
	Applications to	o be filed at the Office o	f the Recorder
	WINNIPEG Unit 360 1395 Ellice Avenue WINNIPEG, Manit R3G 3P2 Phone: (204) 945- Fax: (204) 948-257	e oba 6527	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/Receipt No.
Cheque Amount
Payer
Lease No.

CASH STAMP