



APPLICATION FOR SURFACE LEASE

(In accordance with subsection 149(1) The Mines and Minerals Act)

Holder Name: _____

Address: _____
City/Town Province Postal Code

Phone #: _____ Fax #: _____
Home Business

If lease is to be issued in the Name of a Company or Organization, complete this section and attach copy of Registration:

Registered Name: _____
(Holder)

Authorized Signing Officers: _____

Invoicing/Service Address (if different from above): _____

LEGAL DESCRIPTION OF LAND

Provide the following:

L.S. _____ Section _____ Township _____ Range _____ WPM/EPM

Lot/Parcel _____ Block _____ Plan No. _____ Subdivision/Settlement _____

Mineral Disposition or Mineral Lease No(s). _____

OR

Latitude	Longitude
NE _____	_____
SE _____	_____
SW _____	_____
NW _____	_____

If requested land is not a full quarter section or lot, give full geographical description and complete sketch detail on reverse.
 If an unsurveyed site, map or air photo of site must also be attached.

LAND USE DATA

Existing Use: _____
(Give lease or claim number where applicable)

Proposed Use: _____

Buildings: Existing _____
(Include Year Built, Number of Buildings, Total Areas of Buildings)

Proposed _____
(Give Size, Type of Construction, Value)

Additional Information: Please provide any additional information which could assist in the processing of this application.

OFFICIAL USE ONLY

Cheque/Cash/Auth No. _____	Date _____
Amount _____	Receipt No. _____
Payer _____	Amount _____

REVERSE SIDE MUST BE COMPLETED

SKETCH: This section must be completed unless application is for a surveyed lot or parcel or full quarter section. For unsurveyed areas, also attach air photos and/or topographical map. Show size of site, location existing/proposed buildings and access road(s), distance from existing or proposed buildings to water's edge.

Note: If this section is not completed for unsurveyed areas, the application will be returned for completion.

(Scale: 1" = _____)

Site Dimensions: _____ Size: _____
(Hectares)

I/We hereby certify that all information given in this application is true in substance and in fact; that I/we will not commence any construction or development of the site until I/we have received written approval of this application; that I am over the age of eighteen years. (in the case of individual only)

Date _____
Signature of Applicant

Application fee of \$60 and rent for the first year (\$6.50/ha – min. \$129) must be submitted with the application

REGIONAL COMMENTS:

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