Clear Data

Aboriginal Affairs and Northern Development Canada | Affaires autochtones et Développement du Nord Canada

PROTECTED **A**

CERTIFICATE OF EXTENSION

Form 11

***Privacy Act* Statement**

The information you provide on this form is collected by Aboriginal Affairs and Northern Development Canada under the authority of the Northwest Territories and Nunavut Mining Regulations for the purpose of requesting a certificate of extension. The information may be made available for public inspection, as prescribed by the Regulations, and will be handled in accordance with the provisions of the *Privacy Act* (http://lois.justice.gc.ca/en/P-21/index.html). Individuals have the right to the protection of unauthorized disclosure of and access to their personal information that is under the control of a federal government institution. Instructions for obtaining your personal information are provided in Info Source, a copy of which is available at major public and academic libraries or on line at: http://infosource.gc.ca/index-eng.asp

For Office Use Only

Mining District ◯ NWT ◯ Nunavut

Name(s) of Claim Holder(s)	Mailing Address	Prospector's Licence No.(s) (Valid Licence(s) Required)

Claim Tag No.	Claim Name	Claim Area (Acres)	Existing Excess Credits ($) (If applicable)	Deposit Submitted ($)

If insufficient space, please attach a separate sheet.

Note: All claims must have the same Anniversary Date.

Reason for Application

◯ Illness (Medical Certificate attached)

◯ Other (Specify): _____

Work was to be done during the following period

From (YYYYMMDD) To (YYYYMMDD)

Claim Holder or Agent's Signature

Date (YYYYMMDD)

Department Use Only

Certificate

The time in which the required representation work is to be performed is extended to: _____ day of _____, _____.

Extension Number

Receipt No./Letter of Credit No.	Guarantee Deposit	Receipt No.	Amount of Fees
	$		$

Mining Recorder's Signature

Date (YYYYMMDD)

Canada