Placer renewal number _____

PLACER MINING ACT

APPLICATION FOR RENEWAL OF GRANT FOR PLACER MINING USING EXCESS WORK CREDITS ONLY

Submit to district mining recorder.

Office date stamp

Mining district: _____

Applicant name: _____

Full mailing address: _____

Email: _____

Phone: _____

Claim owner(s) full name (if different from applicant):

_____

Claims for renewal (claim names and grant numbers to be listed in sequence eg. P 510001-P 510040, CLAIM 1-40)

Grant numbers	Claim names	Grouping no. (if applicable)	Renewal years requested

Note: There must be sufficient excess work credits filed with the mining recorder in order for claims to be renewed using this form.

Dated at _____,

this ____ day of _____, 20_____.

_____
Signature of applicant

Access to Information and Protection of Privacy Act: I acknowledge that the information contained in or attached to this application is being collected under the authority of the *Placer Mining Act* sections 7, 9, and 27 and the *Access to Information and Protection of Privacy Act* section 29(c) and is to be used for the purpose of renewing placer claims. The application may be made available to the public. For further information, contact the Department of Energy, Mines and Resources, Mining Lands Office at 867-667-3190 or toll free at 1-800-661-0408 ext. 3190

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