

CLAIM HOLDER AUTHORIZATION

Placer	OFFICE USE ON	LY						
☐ Quartz ☐ Prospecting lease	Date received:		File/reference number:					
Project name		NTS #s				Notification ID		
CLAIM HOLDER INFORMATION		·						
Last name	First na	ıme				Client ID		
Company name	Compa	Company role						
Email	Phone	Offic	e 🗌 Cell	□Fax	Phone	☐ Office	☐ Cell	Fax
Agreement start date:	M/DD Agr	eement end	date: Y	YYY/N	M/DI	0_		
I,as "Operator" identified below, to a number listed above, in the matter on behalf of a business or corporati	of the submission o	vithin the boo of this Mining	ındaries o Land Use	Applica I the bus	tion/Not siness or	ification. Wher corporation.		
Claim holder signature		Date of s				/MM/DD signing		
OPERATOR INFORMATION								
Last name	First na	ıme				Client ID		
Company name	Compa	Company role						
Email	Phone	☐ Offic	e 🗆 Cell	□Fax	Phone	Office	☐ Cell	□Fax
Mailing address	· · · · · · · · · · · · · · · · · · ·							
City/town	Province/Territory/S	erritory/State Postal/Zi		o code		Country		
Registered with Corporate Affairs to conduct business in Yukon?	yes □ No □ N/A	lf yes, Yukon	corporate	registry	number			
Website address								

Access to Information and Protection of Privacy Act: I/we acknowledge that the information contained in or attached to this application is being collected under the authority of the Placer Mining Act sections 7 and 9, the Quartz Mining Act sections 3 and 5, and the Access to Information and Protection of Privacy Act section 29(c) and is to be used for the purpose of reviewing applications. The application may be made available to the public as part of a review process per the Placer Mining Land Use Regulation and/or Quartz Mining Land Use Regulation. 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.