

**SECTION 1: IDENTIFICATION**

**1.1 HOLDER OR HOLDER RESPONSIBLE**

Name of corporation Client No. %  
 \_\_\_\_\_

Last Name First Name Client No. %  
 \_\_\_\_\_

Address (number, street, or rural route) Apt. Town, Village, or Municipality  
 \_\_\_\_\_

Province Country Postal Code Area Code Telephone (home) Area Code Telephone (office)  
 \_\_\_\_\_

Area Code Fax E-mail Address  
 \_\_\_\_\_

**1.2 HOLDER'S REPRESENTATIVE**

Name of corporation Client No.  
 \_\_\_\_\_

Last Name First Name Client No.  
 \_\_\_\_\_

Address (number, street, or rural route) Apt. Town, Village, or Municipality  
 \_\_\_\_\_

Province Country Postal Code Area Code Telephone (home) Area Code Telephone (office)  
 \_\_\_\_\_

Area Code Fax E-mail Address  
 \_\_\_\_\_

**SECTION 2 PARCEL OF LAND DETERMINED BY THE MINISTER SUBJECT TO AMALGAMATION**

SECTION 2.1 Address of the cell NTS Row Column			SECTION 2.2 Numbers of the map designated claims located within the cell indicated in Section 2.1								

How many map designated claims do you wish to amalgamate?   
*(Amalgative applications apply only to map designated claims obtained over parts of cells (30 seconds of latitude by 30 seconds of longitude)).  
 Note: If more space is needed, please print an additional page.*

**SECTION 3: STATEMENT OF THE HOLDER RESPONSIBLE OF THE CLAIMS OR HIS REPRESENTATIVE**

As a holder or holder representative, you are responsible of all information disclosed on this form.  
 Check the appropriate box; print your name; and date and sign the statement.

Statement of the Mining Rights Holder  or his Representative

Signatory's Last Name Signatory's First Name Client No.  
 \_\_\_\_\_

*I hereby certify that the information provided herein and on the attached documents is true and correct. I am the holder of these mining rights or the duly authorized representative of the holder.*

DATE X  
 SIGNATURE

This form can be: <b>Sent to the following mailing address</b> Ministère des Ressources naturelles et des Forêts Direction des affaires minières et de la coordination 5700, 4e Avenue Ouest, local C-320 Québec (Québec) ) G1H 6R1	or emailed to: <a href="mailto:services.mines@mern.gouv.qc.ca">services.mines@mern.gouv.qc.ca</a> or faxed to: 418 643-9297
---	--