Québec Mining rights transfer application

SECTION 1 :	IDENTIFICATION O	F BUYER (if more than	one buy	ver, see r	everse)			
_	Name of company				Co	mpany reg	gistration n°	Client n°
or	Name		First	name			Date of birth	Client n°
Address (number	r, street, R.R. or P.O. box	()		App.	City, town or m	nunicipalit	у	
Province	Co	ountry Posta	al Code	Area c	ode Telephone (I	home) A	Area code Telephone (of	fice) Ext.
							(
Area code Fax		E-mail addre	SS					
SECTION 2 - 0	ORRESPONDENCE A	DDRESS (If different)						
	Name of company				Co	mpany reg	gistration n°	Client n°
or	Name		First	name			Date of birth	Client n°
Address (number	r, street, R.R. or P.O. box	()		App.	City, town or m	nunicipalit	у	
Drovince	0	ountry Dooto	ol Codo	A	ede Telenhene (l	homo) (Area anda Talankana (af	
Province		ountry Posta	al Code	Area c	ode Telephone (I	nome) /	Area code Telephone (of	fice) Ext.
Area code Fax		E-mail addre	ss					
SECTION 3 – L		S AND PERCENTAGE						
	THE GRANTOR T	RANSFERS	% OF HI	S RIGHT	S IN TITLES M	ENTIONE	D HEREUNDER.	
TITI	LE Nº	TITLE N°			TITLE N°		TITLE N	0
		nt another page or enclose	an annex.					
	EGISTRATION FEES							
		submitted along with the t be made out to the « N					\$ per title, up to a ma	aximum of
Amount to o	nclose : number of	titles		X 21,90	¢ _			\$
		uues						Ψ
Method of pa	ayment: alance of the intervening	a party #			rd (online on we able to the Minis			order
		ore the payment is com						
		ictions will be sent to y						
SECTION 5 – S	IGNATURE OF PARTI	ES AND RESOLUTION	l (if more	than on	e grantor or bu	ıyer s , see	e reverse)	
	OR IS A COMPANY, <u>R</u> APPLICATION.	ESOLUTION FROM TH	IE BOAR	D OF DI	RECTORS MUS	ST COMP	ULSORILY BE ATTA	CHED TO
		ONE BUYER, ENTER T		CENTAG		RED TO E	ACH OF THEM.	
GRANTOR (in					(In block letters)			%
COMPANY				COMPAN	Y			
NAME				NAME				
FIRST NAME				FIRST NA	ME			
Х				Х				
Signature		Date		Signatu	ure		Dat	te
		FOR DEP	ARTMEN					
Registratio	on seal	This form can be Sent to the following						
		Ministère des Res Service de la gest	tion des dr	oits minie		Request	no:	<u> </u>
		5700, 4e Avenue Ouest, lo Québec (Québec) G1H 6R		cal C-320		Recention	n date:	
		or Emailed to: services.mines@mern.gouv.gc.ca			c.ca			
		or Faxed to: 418 643-92			_			

Service de la gestion des droits miniers

GRANTOR (in block letters)		BUYER (In block letters)	%
COMPANY		COMPANY	
NAME		NAME	
FIRST NAME		FIRST NAME	
		ADDRESS	i
x		x	
Signature	Date	Signature	Date

GRANTOR (in block letters)		BUYER (In block letters)	%
COMPANY		COMPANY	
NAME		NAME	
FIRST NAME		FIRST NAME	
		ADDRESS	
Х		Х	
Signature	Date	Signature	Date

GRANTOR (in block letters)		BUYER (In block letters)	%
COMPANY		COMPANY	
NAME		NAME	
FIRST NAME		FIRST NAME	
		ADDRESS	
X		X	
Signature	Date	Signature	Date

NOTE: IF SPACES ARE INSUFFICIENT, PLEASE, USE THIS PAGE AS A COPY.

NOTE: IF MORE THAN ONE BUYER, THE BUYER OF "SECTION 1" WILL BE THE RESPONSIBLE UNLESS THE GRANTOR TRANSFERS ONLY A PART OF HIS RIGHTS.