

**MINES BRANCH**

**APPLICATION FOR RECORDING CHANGE OF HOLDER'S NAME  
ON MINERAL DISPOSITION(S)**

I/We,

Address

City  Province  Postal Code

Email

Name (Agent if applicant not resident of Manitoba)

Address

City  Province  Postal Code

Email

do hereby request that my/our name be entered as holder in the record of the following Mineral Disposition(s):

I/We accept as holder of the above noted disposition(s), all the duties and responsibilities of holder pursuant to The Mines and Minerals Act, the Regulations thereunder, and all other relevant legislation; and I/We indemnify and save harmless the Crown in right of the Province of Manitoba from and against any and all claims of beneficial owners or other interested persons in relation to the above disposition(s), which claims may arise as a result of acts or omissions on my/our part.

Authorization under which this application is made.

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Applicant

Application fee is \$15.00 per disposition.

Unit 360-1395 Ellice Avenue  
Winnipeg, Manitoba R3G 3P2  
Telephone: 204-945-3152  
Fax: 204-948-2578

Barrow Building  
143 Main Street  
Flin Flon, Manitoba R8A 1K2  
Telephone: 204-687-1630

Email: [mines\\_br@gov.mb.ca](mailto:mines_br@gov.mb.ca)

Website: [www.gov.mb.ca/iem/mines/imaqs/index.html](http://www.gov.mb.ca/iem/mines/imaqs/index.html)

**OFFICIAL USE ONLY**

Cheque/Cash/Auth. No. \_\_\_\_\_ Date \_\_\_\_\_

Amount \_\_\_\_\_ Receipt No. \_\_\_\_\_

Payer \_\_\_\_\_ Amount: \_\_\_\_\_

Client No. \_\_\_\_\_