

Complete this form if you wish to :

- authorize the ministère des Ressources naturelles et de la Faune to communicate confidential information to a designated person or organism (parts 1, 2 and 5 of this form);
- authorize the ministère des Ressources naturelles et de la Faune to communicate financial data by E-mail (part 4);
- allow a new authorization (additional authorization or replacement) (parts 1, 2 and 5);
- revoke an authorization that has already been submitted to the ministère des Ressources naturelles et de la Faune (parts 1, 3 and 6).

This authorization pertains to the *Mining Duties Act* (R.S.Q., c.- D-15) and must be provided by an authorized representative.

You may **revoke or modify** an authorization at any time.

Return this form to the following address : Direction de l'imposition minière, ministère des Ressources naturelles et de la Faune, 880, chemin Sainte-Foy, bureau 4.50, Québec (Québec) G1S 4X4. You can also send this form by fax at (418) 643-9297.

1 IDENTIFICATION		
Name of operator :	File Number :	
2 DESIGNATED PERSON OR ORGANISM		
Check the appropriate box :		
<input type="checkbox"/> authorization	<input type="checkbox"/> additional authorization	<input type="checkbox"/> new authorization (replacement)
Surname	First Name	Function
Surname	First Name	Function
Name of company or organism :		
Address (Number, Street or Rural Route)		Suite
Town, Village or Municipality		
Province	Country	Postal code
Telephone () -	Fax () -	E-mail Address
3 PERSON OR ORGANISM CONCERNED BY THE REVOCATION		
Surname	First Name	Function
Surname	First Name	Function
Name of company or organism :		
4 AUTHORIZATION TO COMMUNICATE BY E-MAIL		
I authorize a representative of the Ministère des Ressources naturelles et de la Faune to send me financial data by E-mail to the following address : _____		
Name of operator or authorized representative	Title or function	
Signature of operator or authorized representative	Date	
5 AUTHORIZATION		
I, undersigned, authorize the ministère des Ressources naturelles et de la Faune to communicate to the person or organism designated under part 2, to give access or exchange all information or document obtained according to the <i>Mining Duties Act</i> (R.S.Q., c. D-15) relative to the person or organism identified under part 1 of this form.		
Name of operator or authorized representative	Title or function	
Signature of operator or authorized representative	Date	
6 REVOCATION		
I, undersigned, revoke the authorization given on _____ (date) to the person or organism identified under part 3.		
Name of operator or authorized representative	Title or function	
Signature of operator or authorized representative	Date	