



AUTHORIZATION FORM - Oil Sand Agreements

Administrative Information

Designated Representative:	_____	Department Use Only:
Contact Name:	_____	Date of Receipt:
Phone Number	(403) - _____	
Fax Number	(403) - _____	
Oil Sands Agreement Number(s)	_____	Fax Received:

AUTHORIZATION IS PROVIDED TO: _____
[Company Name]

Part 1 Authorization for Oil Sands Lease Continuation Application(s)

<input type="checkbox"/> to apply for continuation of the referenced lease number(s)	<input type="checkbox"/> application attached, or <input type="checkbox"/> will be forwarded
<input type="checkbox"/> to apply for extension under 8(1)(h) of the Mines and Minerals Act.	<input type="checkbox"/> application attached, or <input type="checkbox"/> will be forwarded

Part 2 Authorization for 1st Term to Primary Term Lease Application(s)

<input type="checkbox"/> to apply for primary lease from the referenced lease number(s)	<input type="checkbox"/> application attached, or <input type="checkbox"/> will be forwarded
<input type="checkbox"/> to apply for extension under 8(1)(h) of the Mines and Minerals Act.	<input type="checkbox"/> application attached, or <input type="checkbox"/> will be forwarded

Part 3 Authorization for Oil Sands Permit to Lease Application(s)

<input type="checkbox"/> to apply for lease selection(s) from the referenced permit number(s)	<input type="checkbox"/> application attached, or <input type="checkbox"/> will be forwarded
<input type="checkbox"/> to apply for extension under 8(1)(h) of the Mines and Minerals Act.	<input type="checkbox"/> application attached, or <input type="checkbox"/> will be forwarded

Part 4 Authorization for Surrender(s)

to surrender the referenced Oil Sand Agreement(s) or portion thereof as per the Surrender Form

			(403) -
Signature of Authorizing Party	Name	Title	Date (YYYY-MM-DD)
_____	_____	_____	_____

NOTE: i) Only one of three choices above may be selected per authorization form. Choice is *Part 1, 2, 3 or 4*.
 ii) This document and the applicable application form may be faxed. **If faxed please do not mail originals.**

FORWARD COMPLETED FORM TO: Alberta Department of Energy (ADOE) Oil Sands Tenure 9945 - 108 Street Edmonton, AB T5K 2G6	ADOE Website: https://www.alberta.ca/energy.aspx Phone: (780) 427-7425 Fax: (780) 422-0692 <p style="text-align: center;">??? QUESTIONS ???</p> Please phone during business hours 8:15 - 4:30, Monday to Friday Ask for: Oil Sands Tenure
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