



INTERNAL USE ONLY

# RECOVERY OF COMPENSATION

## Section 36 of the Surface Rights Act

Telephone: 780-427-2444  
Fax: 780-427-5798  
Email: [LPRT.Recovery@gov.ab.ca](mailto:LPRT.Recovery@gov.ab.ca)  
Website: [www.LPRT.alberta.ca](http://www.LPRT.alberta.ca)

Land and Property Rights Tribunal  
1229 - 91 Street SW  
Edmonton AB T6X 1E9

First Year Applicant  Returning Applicant Previous File #: \_\_\_\_\_

You must use a separate form for each surface lease agreement or Tribunal order and ensure that the anniversary date of your original agreement has passed before you submit an application to recover any missed payment owed.

### Part 1 - Contact Information

#### APPLICANT(S)

Name <i>(Last)</i>		<i>(First)</i>		Telephone Number ((000) 000-0000)	
Business Name <i>(if applying as a corporation or partnership)</i>					
Address <i>(Street, PO Box, RR)</i>	<i>(Suite, Apartment)</i>	<i>(Town/City/Village)</i>	<i>(Province)</i>	<i>(Postal Code)</i>	
E-mail address <i>(By providing an e-mail address I consent to receive documents by e-mail):</i>				Applying as Business <input type="checkbox"/> Individual <input type="checkbox"/>	

#### LANDOWNER (If different from Applicant(s))

Name <i>(Last)</i>		<i>(First)</i>		Telephone Number ((000) 000-0000)	
Business Name <i>(if applying as a corporation or partnership)</i>					
Address <i>(Street, PO Box, RR)</i>	<i>(Suite, Apartment)</i>	<i>(Town/City/Village)</i>	<i>(Province)</i>	<i>(Postal Code)</i>	
E-mail address <i>(By providing an e-mail address I consent to receive documents by e-mail):</i>				Landowner type Business <input type="checkbox"/> Individual <input type="checkbox"/>	

#### AGENT INFORMATION AND CONFIRMATION (If Applicant is Represented by an Agent)

<input type="checkbox"/> Lawyer	<input type="checkbox"/> Land Agent	<input type="checkbox"/> Personal Representative			
Name <i>(Last)</i>		<i>(First)</i>		Telephone Number ((000) 000-0000)	
Business Name					
Address <i>(Street, PO Box, RR)</i>	<i>(Suite, Apartment)</i>	<i>(Town/City/Village)</i>	<i>(Province)</i>	<i>(Postal Code)</i>	
E-mail address <i>(By providing an e-mail address I consent to receive documents by e-mail):</i>					

I (We) hereby authorize \_\_\_\_\_ to act on my (our) behalf for this application.



**Part 4 - Declaration**

It is important that you fill out the statements in this part of the application accurately and completely and that ALL persons entitled to the compensation sign the application form. Personal representatives are not permitted to sign the application on behalf of the applicant(s).

In support of my/our application,

I DO SOLEMNLY DECLARE THAT:

1. The surface lease agreement, consent of occupant agreement, or Tribunal order described in Part 2 of this application is still in effect;
2. I am (choose one):
  - the person entitled to annual payments under that agreement or order;
  - one of the persons jointly entitled to payments under that agreement or order;
  - a representative of the corporation entitled to the annual payments under that agreement or order, and I have personally informed myself of the relevant and material records and information pertaining to the corporation's application;
3. I (or the corporation I am representing) have not, nor has anyone on my behalf (or on the corporation's behalf) received any of the annual compensation claimed in Part 2 of this application form.
4.  I understand that I am responsible for providing evidence in support of my claim.
5.  I understand that this form is part of the evidence I am asking the Tribunal to rely upon.
6.  I understand that if I have provided false or misleading evidence in support of my application the Tribunal may make any order it considers appropriate including dismissing my claim and rescinding any order awarding compensation.
7.  I understand that by signing this form, I confirm that I have not provided incorrect information or false or misleading evidence.
8.  I understand that by signing this form, I confirm that access to my site was not refused for the purpose of operations, abandonment and/or reclamation, for any of the years claimed.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

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Print Name

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Print Name

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Date

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Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

The personal information collected is for the purpose of setting up application/appeal proceedings which will be provided to those who may be affected by your application/appeal and will be considered a public record. Your contact information will be used to send a follow up survey designed to measure satisfaction with the tribunal proceedings. This personal information collection is authorized by section 33(c) of the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection of personal information, you may contact the Land and Property Rights Tribunal, 1229-91 Street, SW, Edmonton, Alberta T6X 1E9, (780) 427-2444 (Outside of Edmonton call 310-0000 to be connected toll free) or by email to [LPRT@gov.ab.ca](mailto:LPRT@gov.ab.ca).