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For Official Use Only	
Date Received (yyyy/mm/dd)	
Circulation Date (yyyy/mm/d)	
Plan Number	
Requires a Permit?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No

Is this form being completed by the Early Exploration Proponent?

Yes No

Preferred language of correspondence

English French

Part 1 - Project and Early Exploration Proponent Information

Is the proposed early exploration area within the project area for an existing filed Closure plan?

Yes No

Do you know of any pre-existing mine hazards within the proposed Plan area?

Yes No

A - Project Details

Project Name

Region of the Province (see MNDM administrative map)

North-West North-East South

Previous Plan Confirmation/Permit Numbers associated with this project (list)

County/District/Region

Targeted Project Start Date (yyyy/mm/dd)

B - Name of Claim/Lease/Licence of Occupation Holder(s)

Corporation Legal Name

Business Operating Name

Client Number

Business Number

Last Name

First Name

Middle Initial

Address

Unit/Suite/Apt

Street No.

Street Name

PO Box

Rural Route

City, Town or Village

Province/State

Postal Code/Zip Code

Country

Telephone Number

Extension

Fax Number

Email Address

Tenure Type (List all claim, lease, licence of occupation numbers for each holder)

Type	Identifying Number(s) (if more than one, enter each number separated by a comma)
1.	
2.	
3.	
4.	
5.	

C - Address for Service in Ontario
 Check this box is if the same as section B.

Corporation Legal Name

Business Operating Name		Client Number	Business Number
Last Name		First Name	Middle Initial
Address			
Unit/Suite/Apt	Street No.	Street Name	PO Box
City, Town or Village		Province	Postal Code
Telephone Number	Extension	Fax Number	Email Address

D - Qualified Supervisor
 Check this box if same as Section B
Mining Act Awareness Program Number

Corporation Legal Name

Business Operating Name		Client Number	Business Number
Last Name		First Name	Middle Initial
Address			
Unit/Suite/Apt	Street No.	Street Name	PO Box
Rural Route	City, Town or Village		Province/State
Postal Code/Zip Code		Country	
Telephone Number	Extension	Fax Number	Email Address

Section E - Exploration Activities

Select the permitted activity or activities. Please identify where individual activities are taking place on specific claim unit(s) on the accompanying map(s) (See Part 2).

	Proposed Dates (yyyy/mm/dd)		Claim/Lease/Licence of Occupation Number(s)
	Start Date	End Date	Number (s)
<input type="checkbox"/> Geophysical surveys requiring a generator Type:			
<input type="checkbox"/> Mechanized Stripping (<=100m2 in 200m radius) Estimated area (in m ²):			
<input type="checkbox"/> Pitting and Trenching of Bedrock (>1m3, <=3m in 200m radius) Planned Number of Pits/Trenches:			
<input type="checkbox"/> Line Cutting (<1.5m width) Estimated total line length (m):			
<input type="checkbox"/> Mechanized Drilling (assembled weight <=150 kg) Estimated Number of Drill Holes:			

Part 2. Authorization and Signature

A - Surface Rights Owner(s) Notification

- I certify that I have provided a copy of this Exploration Plan to the Surface Rights Owner(s) within the exploration area(s) for this project
OR
 I certify that there are no Surface Rights Owner(s) within the exploration area(s) for this project

B - Attachments

Accompanying this Form

- a) Map(s) indicating location of proposed Permitted Activity(ies) as well as proposed camp location(s):
- Regional Scale Map
 - Project Scale Map
 - Other Map(s)
- b) Appendices
- Additional pages for listing Claim, Lease, Licence of upation Holders
 - Aboriginal Consultation Report
 - Agency Authorization
- c) Other attachment(s) (e.g. information, reports, other agency permits)

Section C - Signature

I, _____, am submitting this Exploration Plan in accordance with the requirements of the *Mining Act* and regulations and hereby agree to undertake mineral exploration activities in accordance with the requirements of that Act and regulations, including applicable requirements in the Provincial Standards for Early Exploration. I understand that the submission of this Exploration Plan is not a substitute for any other approvals or permits that may be required, and that I am responsible for ensuring that the exploration project complies with any other applicable provincial or federal Acts or regulations.

I hereby certify that the contents of this Exploration Plan are true and complete.

Where I have signed on behalf of a corporation, I hereby certify that I have authority to bind the corporation.

I am the: (please select at least one of the following)

- Claim/Lease/Licence of Occupation Holder
- One of the Claim Holders and have authority to sign on behalf of all Claim/Lease/Licence of Occupation Holder(s) (attached appropriate authorizations)
- An Agent designated for the purposes of making this submission on behalf of the Claim/Lease/Licence of Occupation Holder(s) (attached appropriate agency)

I acknowledge that my printed name below shall be deemed a signature for the purposes of this document's submission to the MNDM.

Early exploration proponents may proceed with work as per the submitted plan 30 calendar days from Circulation Date unless otherwise notified by the Director of Exploration.

Name (Please Print)	Date of submission (yyyy/mm/dd)
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Email Address