



MINERAL EXPLORATION PROGRAM
AVIATION EXPOSURE SUPPLEMENTAL APPLICATION

A. APPLICANT INFORMATION

- 1. Applicant's name:
2. Estimated annual expenditures: Fixed Wing: Helicopter:
3. Do you operate an aircraft landing strip?
4a. Have you built, or will you build any helicopter landing pads?
4b. If the answer above is yes, is work sub-contracted?
5. Will any of your employees or sub-contractors conduct any helicopter fueling operations?
6. Will you arrange for analysts or other third parties to visit your properties by helicopter or fixed wing aircraft?
7. If the answer to question 6 (above) is yes, do you request signed waivers?

B. CLAIMS AND LOSSES – Any aviation-related losses or claims during the last 5 years

Table with 4 columns: TYPE OF LOSS, DATE, AMOUNT, DESCRIPTION

C. DECLARATION AND SIGNATURE

THE UNDERSIGNED DECLARES THAT to the best of his or her knowledge and belief, the statements and information in this application statement are true. 'The Company' is hereby authorized to make any investigation and inquiry in connection with the application statement that it deems necessary.

DATED: SIGNED:

Print Name: Title:

SUBMITTED BY (Broker/Producer):