

Letter of Intent Form

GENERAL INSTRUCTIONS

- This Form must adhere to the [Junior Exploration Assistance \(JEA\) 2020 Program Guidelines](#), and be completed following the [JEA 2020 Letter of Intent Guide](#). Read the Guidelines in full before filling out this Form.
- Please type/print clearly. Use additional sheets when necessary.
- Complete all sections in this form. Incomplete forms will not be processed.
- Email completed forms to: MineralIncentive@gov.nl.ca
- The Manager of the Mineral Incentive Program (MIP) will review the Letter of Intent for completeness and clarity. The Department of Natural Resources reserves the right to request clarification of any item included in the Letter of Intent Form.

SECTION A: COMPANY INFORMATION	
Company Name:	
Company Address:	Primary Contact Person:
	Primary Contact Phone Number:
	Primary Contact E-mail Address:

SECTION B: GENERAL PROGRAM INFORMATION	
Property Name:	Property Location:
Approximate Start Date:	Approximate End Date:
Commodity(s):	
Mineral Licence Number(s):	
Exploration Approval Number(s):	

NOTE: If you are working on Crown Land you must attach a map (at an appropriate scale) outlining the location of where the work will be completed.

SECTION C: ACTIVITY INFORMATION				
Grassroots Activities:	YES	NO	Estimated Budget (if "yes"):	Anticipated Activity Start Date (if "yes"):
Regional Ground Geophysical Survey	<input type="checkbox"/>	<input type="checkbox"/>		
Regional Airborne Geophysical Survey	<input type="checkbox"/>	<input type="checkbox"/>		
Regional Geochemical Survey	<input type="checkbox"/>	<input type="checkbox"/>		
Non-Grassroots Activities:	YES	NO	Estimated Budget (if "yes"):	Anticipated Activity Start Date (if "yes"):
Prospecting	<input type="checkbox"/>	<input type="checkbox"/>		
Line-cutting	<input type="checkbox"/>	<input type="checkbox"/>		
Diamond Drilling	<input type="checkbox"/>	<input type="checkbox"/>		
Basal Till Drilling	<input type="checkbox"/>	<input type="checkbox"/>		
Recirculation (RC) Drilling	<input type="checkbox"/>	<input type="checkbox"/>		
Trenching	<input type="checkbox"/>	<input type="checkbox"/>		
Ground Geophysical Survey(s)	<input type="checkbox"/>	<input type="checkbox"/>		
Soil Sampling Survey(s)	<input type="checkbox"/>	<input type="checkbox"/>		
Till Sampling Survey(s)	<input type="checkbox"/>	<input type="checkbox"/>		
Lake Sediment Survey(s)	<input type="checkbox"/>	<input type="checkbox"/>		
Bio-geochemical Survey(s)	<input type="checkbox"/>	<input type="checkbox"/>		
Geological Mapping	<input type="checkbox"/>	<input type="checkbox"/>		
Borehole Survey(s)	<input type="checkbox"/>	<input type="checkbox"/>		
Surface Bulk Hard Rock Sample	<input type="checkbox"/>	<input type="checkbox"/>		
Underground Bulk Hard Rock Sample	<input type="checkbox"/>	<input type="checkbox"/>		
TOTAL				

NOTE: Other activities not listed above must be approved by the Program Manager in advance. To obtain approval for such activities, email: MineralIncentive@gov.nl.ca.

SECTION D: ACTIVITY DESCRIPTION AND RATIONALE

Provide a brief description and rationale for the activities selected in Section C:

SECTION D: ACTIVITY DESCRIPTION AND RATIONALE *(continued)*

Provide a brief description and rationale for the activities selected in Section C:

SECTION E: CHECKLIST, ACKNOWLEDGEMENTS AND SIGNATURES

PLEASE REVIEW AND COMPLETE THE FOLLOWING:

1) If you are completing exploration on Crown Land, did you provide your map(s)?

YES NOT APPLICABLE

2) Is your company in receipt of direct and/or indirect revenue (i.e., royalties from mineral/mining operations)?

YES NOT APPLICABLE

3) Does your company hold the mineral rights to the lands where exploration will be conducted?

YES **IF NO (see note below)**

NOTE: Companies MUST ensure a registered agreement with the holder of the mineral rights is filed with the Mineral Lands Division of the Department of Natural Resources prior to commencing work. Failure to have a registered agreement on file will result in projects being ineligible for funding.

4) Is your company registered to do business in the province of Newfoundland and Labrador?

YES **IF NO**, please register using the link below:

[# @ # # U](#)

NOTE: Companies MUST be registered to do business in the Province of Newfoundland and Labrador prior to commencing their exploration program. Failure to be a registered business at the time exploration programs are conducted will result in projects being ineligible for funding.

5) Is your company setup with a Government of Newfoundland and Labrador Supplier Number?

IF YES, SUPPLIER #: **IF NO**, please register using the link below:

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NOTE: Companies MUST have a Supplier Number from the Department of Finance, Financial Systems Control Division in order to receive payment (direct deposit) from the Government of Newfoundland and Labrador. Failure to obtain and provide a number will result in the applicant not receiving their JEA payment.

SECTION E: CHECKLIST, ACKNOWLEDGEMENTS AND SIGNATURES (continued)

I HEREBY CERTIFY AND AGREE TO THE FOLLOWING:

The Government of Newfoundland and Labrador may publicize in any form, the involvement of the JEA Program in these Projects, including: the name of the recipients, the amount of JEA contribution(s) to the Projects, and the Project themselves.

I will acknowledge the financial support of the JEA Program in all company promotional and/or public information related to this Project.

Recipients WILL NOT be receiving additional funding from other Government Agencies and/or Departments to conduct the Project.

The company listed on this Letter of Intent has reviewed the JEA Program Guidelines for 2020 and agrees to comply with all terms and conditions outlined in the JEA Program Guidelines.

Name (print): _____

Title/Position: _____

Signature: _____

Date: _____

Under the authority of the Access to Information and Protection of Privacy Act, 2015 (ATIPPA, 2015), personal information is collected in order to process, manage and issue the programs or services of the Department of Natural Resources. Personal information is kept confidential as required by ATIPPA, 2015, but may be released under request in accordance with ATIPPA, 2015. If you have questions pertaining to the collection, use and/or disclosure of this information please contact the ATIPP Coordinator at 729-0463.

For Internal Use Only

Date Received:

Date of Review:

Received By:

Reviewed By:

Project File Number: