



# GEOPHYSICAL OPERATIONS RELEASE

I/We, the "Grantor" \_\_\_\_\_  
(Print Name)

of \_\_\_\_\_  
(Full Address)

in the Province of \_\_\_\_\_ in consideration of the sum of \_\_\_\_\_ Dollars  
(Written Amount)

(\$ \_\_\_\_\_ ) do hereby release and forever discharge \_\_\_\_\_  
(Licensee)

and its subcontractors from any and all manners of actions, claims and demands resulting from operations conducted by \_\_\_\_\_ up to and including the date hereof on the lands described below.  
(Permittee/Contractor)

Final cleanup is complete.  YES  NO Clean up to be completed by: Date: \_\_\_\_\_, 20\_\_\_\_  
(Please contact Company 10 days prior to commencement of Spring field work.)

Owned  Leased  Rented \_\_\_\_\_ of Section \_\_\_\_\_ TWP \_\_\_\_\_ RGE \_\_\_\_\_ W \_\_\_\_\_ M  
 Owned  Leased  Rented \_\_\_\_\_ of Section \_\_\_\_\_ TWP \_\_\_\_\_ RGE \_\_\_\_\_ W \_\_\_\_\_ M  
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### Allocation of Payment:

Line No. _____				
Recorded Source Line _____	mile(s) @ \$ _____	per mile	= \$ _____	
Receiver Line _____	mile(s) @ \$ _____	per mile	= \$ _____	
Access _____	mile(s) @ \$ _____	per mile	= \$ _____	
	@ \$ _____		= \$ _____	
		<b>Line Fee Subtotal</b>	<b>= \$ _____</b>	

**Damages / Comments:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Damage Subtotal** = \$ \_\_\_\_\_

**TOTAL:** \$ \_\_\_\_\_

I declare that I have the legal authority or the consent of the Owner, or party lawfully in possession of the lands, to execute this form and accept payment of compensation on behalf of the Owner or such party, and further do hereby understand and agree to this statement. As required by legislation, be aware that you, the Grantor, are giving consent for the collection and use of the personal information on this form for the purpose of conducting and completing geophysical operations.

Owner Signature: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_ Date: \_\_\_\_\_, 20\_\_\_\_

Lessee/Renter/  
Representative Signature: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_ Date: \_\_\_\_\_, 20\_\_\_\_

PROJECT NAME: \_\_\_\_\_ FILE NO.: \_\_\_\_\_

Company Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_

Permit Agent: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Permit Agent Signature: \_\_\_\_\_ Cert. No.: \_\_\_\_\_

Amount \$ \_\_\_\_\_ Date \_\_\_\_\_, 20\_\_\_\_ Cheque # \_\_\_\_\_

Amount \$ \_\_\_\_\_ Date \_\_\_\_\_, 20\_\_\_\_ Cheque # \_\_\_\_\_



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Address: \_\_\_\_\_

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