|  |  |
| --- | --- |
| **GEO Activity Number:**       | **Program Name:**       |
| **Legal: Twp**       **Rge**       **W**       **M** |
| [ ]  **Green Area** [ ]   **White Area** [ ]  **Both Green & White**  | **Joint Inspection with AER? [ ]  Yes [ ]  No**  |

|  |  |
| --- | --- |
| **Program Licensee Name:**       | **Program Licence Number:**      |
| **Program Licensee Address:**       |
| **Town:**       | **Province**:       | **Postal Code:**       |
| **Licensee Contact:**       | **Phone: (**     **)**       | **Email:**       |
|  |
| **Consultant:**       | **Contact Person:**       |
| **Contact Address:**       |
| **Town:**       | **Province:**       | **Postal Code:**       |
| **Contact/Agent:**       | **Phone: (**     **)**       | **Email:**       |

**Program Details**

|  |  |
| --- | --- |
| **Drilled within an exploration restricted area (ERA)? [ ]  Yes [ ]  No**  | **Flowing holes encountered? [ ]  Yes [ ]  No**  |
| **Were any permanent installation/structures left in place? [ ]  Yes [ ]  No If Yes, describe:**       |

**New Cut Clearings**

|  |  |  |
| --- | --- | --- |
| **Pushouts** [ ]  **Yes** [ ]  **No**  |  **Campsites** [ ]  **Yes** [ ]   **No**  |  **Helipads** [ ]  **Yes** [ ]  **No**  |
| **Turnarounds**  [ ]  Y**es**  [ ]  **No**  | **Staging Areas** [ ]  Y**es**  [ ]  **No**  | **Access roads/trails** [ ]  **Yes**  [ ]   **No**  |

**Debris Disposal Type**

|  |  |
| --- | --- |
| **Slashing Completed** **[ ]  Yes** **[ ]  No** | **Rollback** **[ ]  Yes** **[ ]  No**  |

**Erosion Control**

|  |  |
| --- | --- |
| **Ditchblocks / Diversion Ditches** **[ ]  Yes** **[ ]  No**  | **Watercourse crossings and structures removed** **[ ]  Yes** **[ ]  No** **If No, please provide reason:**       |

**Vegetation**

|  |  |
| --- | --- |
| **Noxious weeds present** **[ ]  Yes** **[ ]  No**  | **Fertilizer applied** **[ ]  Yes** **[ ]  No If yes, date applied:**  |
| **80% revegetative cover:** **[ ]  Yes** **[ ]  No** | **% Coverage**  |
| **If less than 80%, please provide reason:**       |
| **Date of final clean up:**       | **Date of final inspection:**       |

I, the undersigned, certify that this program has been inspected and that the program described above has been completed as per the [*Exploration Regulation* (AR 284/2006)](http://www.aer.ca/applications-and-notices/application-process/exploration-directives-forms) and the conditions of the approval have been met, including reclamation and vegetation.

           **­**

**Company Representative (Signature) Company Representative (Please Print)**

**Comments**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **\_\_\_**

**­­­­­­­­­­­­­­­­­­­­­This form must be completed, signed, and sent electronically to** **exploration@aer.ca****.**