

Branch File # \_\_\_\_\_

Registration #: \_\_\_\_\_  
Date and Time Received: Y / M / D

Signature of Division Head  
Date: Y / M / D

**DO NOT WRITE ABOVE THIS LINE. FOR DEPARTMENT USE ONLY.**

**A. Disposition.** The secured party hereby gives notice that it has a security interest affecting the following disposition (type and number.) Submit one notice for each disposition affected by the security interest.

**B. Full name of secured party.**

**C. Description of security instrument.** Describe the general nature of the security interest arising under the security instrument (for example, a bank assignment under the *Bank Act*, a debenture, a mortgage, etc.)

Dated Y / M / D Expiry date (optional) Y / M / D

**D. Address for service of secured party.**

Full name of Agent of secured party if different from B.

Street Address, Suite, Box Number

City Province/Territory or State Country Postal Code

Phone Number Fax Number E-mail Address

**E.**  Registration fee of \$50.00 is enclosed.

**F. Signature of secured party or agent.**

Signature

Name (print or type) Capacity

**G. Dated**

this \_\_\_\_\_ day of \_\_\_\_\_

**H. Disclaimer.** If there is any conflict or inconsistency between this form or the Guidelines and a provision of the *Oil and Gas Act* or any regulations under it, the latter provision prevails.