STATE OF ALASKA
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL AND GAS

INDIVIDUAL STATEMENT OF QUALIFICATION

I, _____ certify that as an applicant for an
(typed or printed name)
interest in oil and gas resources in the State of Alaska, I am the age of majority. The age of majority in Alaska is 18 years, except for those who are automatically emancipated earlier by marriage or those emancipated by court order.

_____ _____
Signature Date

_____
Street or P. O. Box

_____
City, State, Zip Code

_____
Telephone Number

_____
E-mail (optional)

NOTE: This information is made a part of the state public land records and becomes public information under AS 40.25.110 and 40.25.120 (unless the information qualifies for confidentiality under AS 38.05.035(a)(9) and confidentiality is requested). Public information is open to inspection by you or any member of the public. A person who is the subject of the information may challenge its accuracy or completeness under AS 44.99.310, by giving a written description of the challenged information, the changes needed to correct it, and a name and address where the person can be reached.

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Notary Acknowledgement (optional)

THE UNITED STATES OF AMERICA)
) SS.
STATE OF _____)

THIS CERTIFIES that on the _____ day of_____, 20___, before me appeared _____, known to me to be the person who executed this document and acknowledged voluntarily signing it.

_____
Notary Public
My Commission expires: _____