



OPEN FILE PERMISSION-TO-PUBLISH FORM

Date

Division

Title

Open File number

(assigned by Digital Design Unit)

Critical reviewer's signature

Primary Contact

Last name

First name

Phone

Fax

E-mail

Author(s)

Last name

First name

Last name

First name

Last name

First name

Type of product

Report

Diskette

Map

CD-ROM

Projected release date

Partnership Project

(e.g. NATMAP, MITE)

Additional information

Special viewing and sales requirements

Division Director
Signature

Date (dd-mm-year)

Chief Geoscientist
Signature

Date (dd-mm-year)

Canada