

Fisheries Damage Compensation Program

End of Claim Release Form

Submit to:	Cenovus Energy (E	invironmental Assuranc	ce Specialist)	Do not write in this		
	351 Water Street,	St. John's, NL, A1C 1C2				
Fax:	(709) 724-3915					
	Final Release					
THIS RELEASE	is in respect of the	property damage and re	elated costs sustair	ned by the fishing vessel,		
		. , ,	owned and ope	,		
-	Vessel Name	CFV Number		Name of Owner	er	
of		, as a result of				
	Location	•		Describe Circumstance Briefly		
on or about _	Date of Incident	(the "Incident").		,		
IN CONSIDERA	ATION of payment ir	the amount of				
			Write	Value (incl. HST)	\$ #.## (incl. HST)	
to replace/rep	pair the following ite	ms at the per unit costs	shown in the table	e below:		
	J	•				

Sub-total HST (15%) Total

Cost Per Unit

\$ Value

Item(s)



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THE UNDERSIGNED, successors and assigns: Name of Claimant	_ , hereby for himself/herself, his/h	er heirs, executors, administrators,				
 (i) releases and forever discharges Cenovus Energy I the "Releasees") from any and all actions, causes loss or injury to person and property, including fo result of the Incident; (ii) agrees not to make any claim or take proceeding indemnity from the Releasees under the provision 	of action, claim and demands for, or lost time, loss of income, expense	upon or by reason of any damage, es or damages which occurred as a				
(iii) agrees that the said payment is not deemed to be	e an admission of liability on the pa	rt of the Releasees;				
(iv) declares that the terms of this settlement are full consideration of this Release and that such amou claims which might arise out of the Incident; and	•					
(v) agrees to accept all liability for sharing the payment specified above, if necessary, and for any other claim the individuals named might have in respect of the Incident.						
I hereby certify that the above information is, to the best of my knowledge, full and accurate in every detail.						
Signed by:						
Signature	At	Date				