



REQUEST FOR FINANCIAL STATEMENTS

TO: Our registered and non-registered shareholders

If you are interested in receiving Nunavik Nickel Mines Ltd.'s annual and interim financial statements and management's discussion and analysis relating to those financial statements, as the case may be (respectively referred to as a "Financial Reporting Package"), please complete and return this notice to the address noted below.

With your consent, we will send our Financial Reporting Package to you by facsimile or e-mail. To enable us to use facsimile or e-mail we require your consent below, together with a facsimile number or e-mail address.

Notwithstanding your election below, copies of our Financial Reporting Package may be obtained without charge upon request to us at the contact details specified below. You may also access our disclosure documents through the Internet on the Canadian System for Electronic Document Analysis and Retrieval (SEDAR) at www.sedar.com.

- ☐ Yes, I want to be placed on the annual mailing list and receive copies of audited annual financial statements and related Management's Discussion and Analysis.
- ☐ Yes, I want to be placed on the supplementary mailing list and receive copies of the unaudited interim financial report for the first, second and third quarters, as the case may be, and related Management's Discussion and Analysis.
- ☐ Yes, I consent to the delivery of interim or annual financial statements, as the case may be, and related Management's Discussion and Analysis indicated above by electronic means and have provided my facsimile number or e-mail address below. I acknowledge that I may revoke this consent or revise the delivery instructions (including the facsimile number or e-mail address for delivery) at any time by notifying Nunavik Nickel Mines Ltd. of such revocation or revision, as the case may be.

Please complete the following:

_____ Name of Shareholder (please print)			Preferred Method of Communication: ☐ Mail ☐ E-mail ☐ Facsimile
_____ Street Address			_____ E-mail Address (if applicable)
_____ City	_____ Province/State	_____ Postal/Zip Code	_____ Facsimile Number (if applicable)
I certify that I am a registered or beneficial shareholder of Nunavik Nickel Mines Ltd.:			_____ Date:
_____ Signature			

Delivery of the information provided in this form to Nunavik Nickel Mines Ltd. will be deemed to be consent to Nunavik Nickel Mines Ltd. to collect such information and use it for the purpose stated above. You will be further deemed to have consented to Nunavik Nickel Mines Ltd. disclosing such information to third party service providers who provide, from time to time, mail and delivery services for Nunavik Nickel Mines Ltd.

Completed forms should be returned to:

NUNAVIK NICKEL MINES LTD.
 2864 chemin Sullivan
 Val-d'Or, Québec J9P 0B9
 Attention: Chief Financial Officer
 Facsimile: (819) 824-3379
 Telephone: (819) 824-2808