Form 45-106F1 Report of Exempt Distribution

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 – REPORT TYPE						
X New report Amended report If amended, provide filing date of report that is being amended. (YYYY-MM-DD)						
ITEM 2 - PARTY CI	ERTIFYING THE REPORT					
	the report (select only one). For guidan Investment Fund Continuous Disclosi		er is an investment fund, refer to section 1.1 of			
Investment fun		and and the companion policy				
X Issuer (other th	han an investment fund)					
Underwriter						
ITEM 3 – ISSUER N	AME AND OTHER IDENT	IFIERS				
Provide the following informa	ation about the issuer, or if the issuer i	is an investment fund, about tl	he fund.			
Full le	egal name Enertopia Corp.					
Previous full le	egal name					
If the issuer's name	e changed in the last 12 months, provi	ide most recent previous legal	name.			
	Website	(if ap	pplicable)			
If the issuer has a legal entity	y identifier, provide below. Refer to Par	rt B of the Instructions for the o	definition of "legal entity identifier".			
Legal entity	y identifier					
ITEM A - UNDERW	RITER INFORMATION					
		s full logal name and firm Nat	ional Registration Database (NRD) number.			
Full legal name	- In the report, provide the underwriter.	s fait legat name and fam tvat	tonat negistration batabase (NND) number.			
_						
_	Firm NRD number (if applicable)					
If the underwriter does not he Street address	If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.					
		D				
Municipality		Province/State				
Country		Postal code/Zip code				
Telephone number		Website	(if applicable)			

If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6. a) Primary industry Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that corresponds to the issuer's primary business activity. For more information on finding the NAICS industry code go to Statistics Canada's NAICS industry search tool. NAICS industry code 2 1 2 2 9 9 9 If the issuer is in the mining industry, indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations. X Exploration Development Production Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply. Mortgages Real estate Commercial/business debt Consumer debt Private companies b) Number of employees Number of employees: X 0 - 49 50 - 99 100 - 499 500 or more c) SEDAR profile number Does the issuer have a SEDAR profile? No X Yes If yes, provide SEDAR profile number 0 0 0 2 7 4 0 8 If the issuer does not have a SEDAR profile complete Item 5(d) - (h). d) Head office address Street address Province/State Province/State Postal code/Zip code Telephone number e) Date of formation and financial year-end				
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c) SEDAR profile number Does the issuer have a SEDAR profile? No X Yes If yes, provide SEDAR profile number 0 0 0 2 7 4 0 8 If the issuer does not have a SEDAR profile complete Item 5(d) – (h). d) Head office address Street address Province/State Municipality Postal code/Zip code Country Telephone number				
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d) Head office address Street address Province/State Postal code/Zip code Country Telephone number				
Street address Province/State Postal code/Zip code Country Telephone number				
Municipality Postal code/Zip code Country Telephone number				
Country Telephone number				
e) Date of formation and financial year-end				
of Bate of formation and infanoial four one				
Date of formation Financial year-end MM DD Financial year-end				
f) Reporting issuer status				
Is the issuer a reporting issuer in any jurisdiction of Canada? No Yes				
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.				
☐ AII ☐ AB ☐ BC ☐ MB ☐ NB ☐ NL ☐ NT ☐ NS ☐ NU ☐ ON ☐ PE ☐ QC ☐ SK ☐ YT				
NSNUONPEQCSKYT g) Public listing status				
If the issuer has a CUSIP number, provide below (first 6 digits only)				
CUSIP number				
If the issuer is publicly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for which the issuer has applied for and received a listing, which excludes, for example, automated trading systems. Exchange names				
h) Size of issuer's assets Select the size of the issuer's assets for its most recent financial year-end (Canadian \$). If the issuer has not existed for a full financial year, provide the				
size of the issuer's assets at the distribution end date.				
\$0 to under \$5M				

ITEM 6 – INVESTMENT FUND ISSUER INFORMATION					
If the issuer is an investme	ent fund, provide the following information.				
a) Investment fund ma	nanager information				
Full legal name					
Firm NRD Number	(if applicable)				
Timi NICD Number	(п аррпсаше)				
I -	does not have a firm NRD number, provide the head office contact information of the investment fund manager.				
Street Address					
Municipality	Province/State				
Country	Postal code/Zip code				
Telephone number	Website (if applicable)				
b) Type of investment	it fund				
Type of investment fund that mo	ost accurately identifies the issuer (select only one).				
Money market	Equity Fixed income				
Balanced	Alternative strategies Other (describe)				
Indicate whether one or both of	the following apply to the investment fund.				
	n other investment fund issuers				
Is a UCITs Fund ¹					
	ment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow				
	and financial year-end of the investment fund				
Date of formation	YYYY MM DD Financial year-end MM DD				
d) Reporting issuer st	tatus of the investment fund				
	ng issuer in any jurisdiction of Canada? No Yes				
·	Canada in which the investment fund is a reporting issuer.				
	AB BC MB NB NL NT				
	NU				
e) Public listing status	s of the investment fund				
If the investment fund has a CUSIP number, provide below (first 6 digits only).					
CUSIP number					
If the investment fund is publicly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges					
for which the investment fund has applied for and received a listing, which excludes, for example, automated trading systems.					
Exchange names					
f) Net asset value (NAV) of the investment fund					
Select the NAV range of the inve	Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$).				
\$0 to under \$5M	\$5M to under \$25M \$25M to under \$100M				
\$100M to under \$500M \$500M to under \$1B \$1B or over Date of NAV calculation: YYYY MM DD					

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees, which should be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.

a) Currency

Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.

•				
X Canadian dollar	US dollar	Euro	Other (describe)	

b) Distribution date(s)

State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report.

Start date	2017	02	28	End date	2017	02	28
	YYYY	MM	DD		YYYY	MM	DD

c) Detailed purchaser information

Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.

d) Types of securities distributed

Provide the following information for all distributions that take place in a jurisdiction of Canada on a per security basis. Refer to Part A of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.

							Canadian	\$
Security code		,	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
U	В	S		Units. Each unit consists of one common share and one share purchase warrant.	4,250,000	\$0.04		\$170,000.00

e) Details of rights and convertible/exchangeable securities

If any rights (e.g. warrants, options) were distributed, provide the exercise price and expiry date for each right. If any convertible/exchangeable securities were distributed, provide the conversion ratio and describe any other terms for each convertible/exchangeable security.

Sec		Security code			Underlying		Exercise price (Canadian \$)		Expiry date	Conversion	Describe other terms (if applicable)
	security code			Lowest	Highest	(YYYY-MM-DD)	ratio	, , ,			
	W	N	Т	С	М	S	\$0.08 (1)	\$0.08 (1)	2019-02-28		One share purchase warrant is exercisable for the purchase of one common share at a price of CDN\$0.08 (US\$0.06) for a period of two years until February 28, 2019. Based on a Bank of Canada exchange rate on Feb. 28, 2017 of 1.3248.

⁽¹⁾ Based on a Bank of Canada exchange rate on February 28, 2017 of 1.3248 (Warrants issued at US\$0.06).

f) Summary of the distribution by jurisdiction and exemption

State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only.

This table requires a separate line item for: (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction.

For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Exemption relied on	Number of purchasers	Total amount (Canadian \$)
B.C.	Section 2.3 of NI 45-106 (Accredited Investor)	8	\$64,000.00
B.C.	Existing Security Holder Exemption	28	\$48,000.00
Alberta	Section 2.3 of NI 45-106 (Accredited Investor)	1	\$8,000.00
Alberta	Existing Security Holder Exemption	7	\$22,000.00
Nova Scotia	Existing Security Holder Exemption	1	\$1,000.00
Ontario	Section 2.3 of NI 45-106 (Accredited Investor)	1	\$3,000.00
Ontario	Existing Security Holder Exemption	1	\$1,000.00

Saskatchewan	Existing Security Holder Exemption	1	\$1,000.00
Manitoba	Existing Security Holder Exemption	1	\$2,000.00
Switzerland	Section 2.3 of NI 45-106 (Accredited Investor)	1	\$20,000.00
	\$170,000.00		
	Total number of unique purchasers ²	50	

In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.

g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides.³ If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Net proceeds (Canadian \$)
Total net proceeds to the investment fund	

^{3&}quot;Net proceeds" means the gross proceeds realized in the jurisdiction from the distributions for which the report is being filed, less the gross redemptions that occurred during the distribution period covered by the report.

h) Offering materials - This section applies only in Saskatchewan, Ontario, Québec, New Brunswick and Nova Scotia.

If a distribution has occurred in Saskatchewan, Ontario, Québec, New Brunswick or Nova Scotia, complete the table below by listing the offering materials that are required under the prospectus exemption relied on to be filed with or delivered to the securities regulatory authority or regulator in those jurisdictions.

In Ontario, if the offering materials listed in the table are required to be filed with or delivered to the Ontario Securities Commission (OSC), attach an electronic version of the offering materials that have not been previously filed with or delivered to the OSC.

	Description	Date of document or other material (YYYY-MM-DD)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)
1.				
2.				
3.				

Item 8 – Compensation Information						
Provide information for each person (as defined in NI 45-106) to who with the distribution. Complete additional copies of this page if n	om the issuer directly provides, or will provide, any compensation in connection nore than one person was, or will be, compensated.					
	Indicate whether any compensation was paid, or will be paid, in connection with the distribution. No X Yes If yes, indicate number of persons compensated.					
a) Name of person compensated and registration sta	tus					
Indicate whether the person compensated is a registrant. No X Yes						
If the person compensated is an individual, provide the name of the i	ndividual.					
Full legal name of individual						
Family name If the person compensated is not an individual, provide the following	First given name Secondary given names					
Full legal name of non-individual Leede Jones	1					
Firm NRD number 5 7 7 Indicate whether the person compensated facilitated the distribution	0 (if applicable)					
X No Yes	amough a funding portation air internet based portat.					
b) Business contact information						
If a firm NRD number is not provided in Item 8(a), provide the busine	ess contact information of the person being compensated.					
Street address						
Municipality	Province/State					
Country	Postal code/Zip code					
Email address	Telephone number					
c) Relationship to issuer or investment fund manager						
Indicate the person's relationship with the issuer or investment fund of the Instructions and the meaning of "control" in section 1.4 of NI 4. Connected with the issuer or investment fund manage	to the contract of the contrac					
Insider of the issuer (other than an investment fund)						
Director or officer of the investment fund or investmen	t fund manager					
Employee of the issuer or investment fund manager						
X None of the above						
d) Compensation details						
Provide details of all compensation paid, or to be paid, to the person	identified in Item 8(a) in connection with the distribution. Provide all amounts					
	pensation, gifts, discounts or other compensation. Do not report payments for					
report on, internal allocation arrangements with the directors, officer	or accounting services. An issuer is not required to ask for details about, or s or employees of a non-individual compensated by the issuer.					
Cash commissions paid \$2,000.00						
Value of all securities distributed 0 S	Security code 1 Security code 2 Security code 3					
as compensation ⁴	W N T					
Describe terms of warrants, options or other rights 50,000 Broker's warrants. Each broker's warrant is exercisable into one common share at a price of CDN\$0.08 (US\$0.06) per share for a period of two years until February 28, 2019						
Other compensation ⁵ Describe						
Total compensation paid \$2,000.00						
Check box if the person will or may receive any deferred	compensation (describe the terms below)					
, , , , , , , , , , , , , , , , , , , ,	,					
	ing options, warrants or other rights exercisable to acquire additional securities of the issuer.					
Indicate the security codes for all securities distributed as compensation, <u>including</u> 5Do not include deferred compensation.	<u>q</u> options, warrants or other rights exercisable to acquire additional securities of the issuer.					

ITEM 8 – COMPENSATION INFORMATION					
Provide information for each person (as defined in NI 45-106) to who with the distribution. Complete additional copies of this page if n	om the issuer directly provides, or will provide, any compensation in connection more than one person was, or will be, compensated.				
Indicate whether any compensation was paid, or will be paid, in con	nection with the distribution.				
No X Yes If yes, indicate num	ber of persons compensated.				
e) Name of person compensated and registration sta	ntus				
Indicate whether the person compensated is a registrant. No X Yes					
If the person compensated is an individual, provide the name of the	individual.				
Full legal name of individual					
Family name	First given name Secondary given names				
If the person compensated is not an individual, provide the following Full legal name of non-individual Canaccord C	Genuity Corp.				
Firm NRD number 9 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	through a funding portal or an internet-hased portal				
X No Yes	amough a fanding portact of an internet based portac				
f) Business contact information					
If a firm NRD number is not provided in Item 8(a), provide the busine	ess contact information of the person being compensated.				
Street address					
Municipality	Province/State				
Country	Postal code/Zip code				
Email address	Telephone number				
g) Relationship to issuer or investment fund manager					
Indicate the person's relationship with the issuer or investment fund of the Instructions and the meaning of "control" in section 1.4 of NI a Connected with the issuer or investment fund manage Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment Employee of the issuer or investment fund manager X None of the above	er				
h) Compensation details					
, 1	identified in Item 8(a) in connection with the distribution. Provide all amounts				
in Canadian dollars. Include cash commissions, securities-based com	opensation, gifts, discounts or other compensation. Do not report payments for or accounting services. An issuer is not required to ask for details about, or				
Value of all securities distributed 0	Security code 1 Security code 2 Security code 3 Security code 3				
as compensation ⁴	W N T				
Describe terms of warrants, options or other rights 177,500 Broker's warrants. Each broker's warrant is exercisable into one common share at a price of CDN\$0.08 (US\$0.06) per share for a period of two years until February 28, 2019					
Other compensation ⁵ Describ	е				
Total compensation paid \$7,100.00					
Check box if the person will or may receive any deferred	d compensation (describe the terms below)				
	ding options, warrants or other rights exercisable to acquire additional securities of the issuer. Ig options, warrants or other rights exercisable to acquire additional securities of the issuer.				

ITEM 8 - COMPENSATION INFORMATION						
Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated.						
Indicate whether any compensation was paid, or will be paid, in connection with the distribution. No X Yes If yes, indicate number of persons compensated.						
i) Name of person compensated and registration status						
Indicate whether the person compensated is a registrant. X No Yes						
If the person compensated is an individual, provide the name of the individual.						
Full legal name of individual McKay Duncan						
Family name First given name Secondary given names If the person compensated is not an individual, provide the following information.						
Full legal name of non-individual						
Firm NRD number (if applicable) Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.						
X No Yes						
j) Business contact information						
If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being compensated.						
Street address Via Latino, 215						
Municipality Puglia Province/State BR						
Country Italy Postal code/Zip code 72024						
Email address Telephone number +41-76-802-2208						
k) Relationship to issuer or investment fund manager						
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connected with the issuer or investment fund manager						
Insider of the issuer (other than an investment fund)						
Director or officer of the investment fund or investment fund manager						
Employee of the issuer or investment fund manager						
X None of the above						
I) Compensation details						
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer. Cash commissions paid \$2,000.00						
Value of all securities distributed as compensation ⁴ 0 Security code 1 Security code 2 Security code 3						
Describe terms of warrants, options or other rights						
Other compensation ⁵ Describe						
Total compensation paid \$2,000.00						
Check box if the person will or may receive any deferred compensation (describe the terms below)						
Check box if the person will of may receive any deferred compensation (describe the terms below)						
⁴ Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. ⁵ Do not include deferred compensation.						

ITEM 9 – DIRECTORS, EXEC	UTIVE OFFICERS	AND PROM	OTERS OF	THE IS:	SUER				
If the issuer is an investment fund,	do not complete Ite	em 9. Proceed t	o Item 10.						
If the issuer is an investment fund, Indicate whether the issuer is any of the image of the image of the issuer in any jurisd in its image of the issuer in any jurisd in its image of the image of the image of the image of the issuer is at least one of the all issuer is a wholly owned subsidiary of a law to be owned by its directors, are beneficial in its image of the image of th	do not complete Items of following (select an iction of Canada and reporting issuer in a conference of reporting issuer and foreign public issuer beign securities only the properting issuer or a foreignly owned by the reporting issuer or a foreig	any jurisdiction of permitted clie ete Item 9(a) — ign public issuer of the form made previous di	of Canada ⁶ nts ⁷ (c). Proceed to all of the issuer's eign public issuer	o Item 1 outstandir r, respecti	1 0. ng voting secu				
of "eligible foreign security" and "permitted cli									
If the issuer is none of the a		-		(c).					
a) Directors, executive office Provide the following information for a territory, otherwise state the country. If	each director, executi	ive officer and p	romoter of the				da, stat	te the pro	ovince or
Organization or company name	Family name	First given name	Secondary given names		Business loca non-individu			Relationship to issuer (select all that apply)	
					Province	vince or country		0	Р
b) Promoter information									
If the promoter listed above is not an illocations within Canada, state the pro									
Organization or company name	Family name	First given name	Secondary juriso		Residential jurisdiction of individual Relationsh (select one or		nship to or both	nip to promoter both if applicable)	
				country			0		
c) Residential address of e	each individual						1		

Complete Schedule 2 of this form providing the full residential address for each individual listed in Item 9(a) and (b) and

attach to the completed report. Schedule 2 also requires information to be provided about control persons.

9

ITEM 10 - CERTIFICATION

Provide the following certification and business contact information of an officer or director of the issuer or underwriter. If the issuer or underwriter is not a company, an individual who performs functions similar to that of a director or officer may certify the report. For example, if the issuer is a trust, the report may be certified by the issuer's trustee. If the issuer is an investment fund, a director or officer of the investment fund manager (or, if the investment fund manager is not a company, an individual who performs similar functions) may certify the report if the director or officer has been authorized to do so by the investment fund.

The certification may not be delegated to an agent or other individual preparing the report on behalf of the issuer or underwriter. If the individual completing and filing the report is different from the individual certifying the report, provide their name and contact details in Item 11.

The signature on the report must be in typed form rather than handwritten form. The report may include an electronic signature provided the name of the signatory is also in typed form.

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

By completing the information below, I certify to the securities regulatory authority or regulator that:

- I have read and understand this report; and
- all of the information provided in this report is true.

Full legal name	McAllister	Robert						
	Family name	First given name		Secondary given nam				
Title	President							
lame of issuer/underwriter/ investment fund manager	L Enertonia (Torn							
Telephone number	(250) 765-6412	Email address	m	mcallister@enertopia.com		mcallister@enertopia		ppia.com
Signature	(signed) Robert McAllister	Date	2017 03 0		08			
		_	YYYY	/	MM	DD		

T	4 4	C	D
ITFM		CONTACT	PERSON

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Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.

X Same as ind	ividual certifying the rep	port			
Full legal name				Title	
	Family name	First given name	Secondary given names		
Name of company					
Telephone number		Er	nail address		

Notice - Collection and use of personal information

The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation.

If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form.

The attached Schedules 1 and 2 may contain personal information of individuals and details of the distribution(s). The information in Schedules 1 and 2 will not be placed on the public file of any securities regulatory authority or regulator. However, freedom of information legislation may require the securities regulatory authority or regulator to make this information available if requested.

By signing this report, the issuer/underwriter confirms that each individual listed in Schedule 1 or 2 of the report who is resident in a jurisdiction of Canada:

- a) has been notified by the issuer/underwriter of the delivery to the securities regulatory authority or regulator of the information pertaining to the individual as set out in Schedule 1 or 2, that this information is being collected by the securities regulatory authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the security regulatory authority's or regulator's indirect collection of the information, and
- b) has authorized the indirect collection of the information by the securities regulatory authority or regulator.

Questions:

Refer any questions to:

Alberta Securities Commission

Suite 600, 250 - 5th Street SW Calgary, Alberta T2P 0R4 Telephone: (403) 297-6454

Toll free in Canada: 1-877-355-0585

Facsimile: (403) 297-2082

British Columbia Securities Commission

P.O. Box 10142, Pacific Centre 701 West Georgia Street Vancouver, British Columbia V7Y 1L2 Inquiries: (604) 899-6854

Toll free in Canada: 1-800-373-6393

Facsimile: (604) 899-6581 Email: inquiries@bcsc.bc.ca

The Manitoba Securities Commission

500 - 400 St. Mary Avenue Winnipeg, Manitoba R3C 4K5 Telephone: (204) 945-2548

Toll free in Manitoba 1-800-655-5244

Facsimile: (204) 945-0330

Financial and Consumer Services Commission (New Brunswick)

85 Charlotte Street, Suite 300 Saint John, New Brunswick E2L 2J2 Telephone: (506) 658-3060 Toll free in Canada: 1-866-933-2222

Facsimile: (506) 658-3059 Email: info@fcnb.ca

Government of Newfoundland and Labrador Financial Services Regulation Division

P.O. Box 8700 **Confederation Building** 2nd Floor, West Block Prince Philip Drive

St. John's, Newfoundland and Labrador A1B 4J6

Attention: Director of Securities Telephone: (709) 729-4189 Facsimile: (709) 729-6187

Government of the Northwest Territories Office of the Superintendent of Securities

P.O. Box 1320

Yellowknife, Northwest Territories X1A 2L9

Attention: Deputy Superintendent, Legal & Enforcement

Telephone: (867) 920-8984 Facsimile: (867) 873-0243

Nova Scotia Securities Commission

Suite 400, 5251 Duke Street **Duke Tower**

P.O. Box 458

Halifax, Nova Scotia B3J 2P8 Telephone: (902) 424-7768 Facsimile: (902) 424-4625

Government of Nunavut Department of Justice

Legal Registries Division P.O. Box 1000, Station 570 1st Floor, Brown Building Igaluit, Nunavut X0A 0H0 Telephone: (867) 975-6590 Facsimile: (867) 975-6594

Ontario Securities Commission

20 Queen Street West, 22nd Floor Toronto, Ontario M5H 3S8 Telephone: (416) 593-8314 Toll free in Canada: 1-877-785-1555

Facsimile: (416) 593-8122

Email: exemptmarketfilings@osc.gov.on.ca

Public official contact regarding indirect collection of information:

Inquiries Officer

Prince Edward Island Securities Office

95 Rochford Street, 4th Floor Shaw Building

P.O. Box 2000

Charlottetown, Prince Edward Island C1A 7N8

Telephone: (902) 368-4569 Facsimile: (902) 368-5283

Autorité des marchés financiers

800, Square Victoria, 22e étage C.P. 246, Tour de la Bourse Montréal, Québec H4Z 1G3

Telephone: (514) 395-0337 or 1-877-525-0337 Facsimile: (514) 873-6155 (For filing purposes only) Facsimile: (514) 864-6381 (For privacy requests only)

Email: financementdessocietes@lautorite.gc.ca (For corporate finance issuers); fonds dinvestissement@lautorite.qc.ca (For

investment fund issuers)

Financial and Consumer Affairs Authority of Saskatchewan

Suite 601 - 1919 Saskatchewan Drive Regina, Saskatchewan S4P 4H2 Telephone: (306) 787-5879 Facsimile: (306) 787-5899

Government of Yukon

Department of Community Services

Law Centre, 3rd Floor 2130 Second Avenue Whitehorse, Yukon Y1A 5H6 Telephone: (867) 667-5314 Facsimile: (867) 393-6251