



**SITNASUAK**

NATIVE CORPORATION

P.O. Box 905 • Nome, Alaska 99762

(907) 387-1200, Fax (907) 443-3063

## Application for Fisheries Permits and Leases

Everything highlighted in yellow 1-9 is required to be filled out and submitted to the SNC Land Department.

If the application is incomplete, it will be returned to the applicant.

Deadline for Applications is September 30 of each year. Any permit is subject to SNC Land Use Policy.

1. Fisheries requesting for:

Fish Hatchery Lease: \_\_\_\_\_

Fish Research Permit: \_\_\_\_\_

2. Local Contact and Affiliation: \_\_\_\_\_

3. Current mailing address: \_\_\_\_\_

4. City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

5. Local Phone Number: \_\_\_\_\_ e-mail: \_\_\_\_\_

6. Briefly explain extent of activity proposed. What Area and Location are you requesting. Please attach maps depicting area, existing trails & terrain, photos or any other articles for consideration.

\_\_\_\_\_

7. Type of equipment to be utilized. If required, have you applied for any special permits/leases? Please explain.

\_\_\_\_\_

8. Are there any reasons that such activities could endanger the general public's safety? If yes, explain. No

\_\_\_\_\_

9. I hereby certify that all the information provided in this application, including any forms attached is complete and correct to the best of my knowledge. Such permit or lease maybe terminated sooner if by mutual agreement or request of permittee whichever occurs first.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\* SNC Land Department Office Use Only \*\*\*

Record # \_\_\_\_\_ Date received: \_\_\_\_\_

\$500 non-refundable Fisheries Application Fee paid date & payment number:

Area: \_\_\_\_\_ Location: \_\_\_\_\_ Map: \_\_\_\_\_

Term: Short Term Permit: \_\_\_\_\_ Long Term Lease: \_\_\_\_\_ Photo's: \_\_\_\_\_

Commence: \_\_\_\_\_ Expires: \_\_\_\_\_ Activity Plan: \_\_\_\_\_

Size: 1 Acre: \_\_\_\_\_ 2 Acre: \_\_\_\_\_ Other Permits: \_\_\_\_\_