

P.O. Box 905 Nome, Alaska 99762

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

## **Application for Land Use 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. Land Use requesti				••••
Recreational, Scien	ntific & Culture/Youth Activ	ities Permit:		
Communication T	Cowers Permit or Lease:	Staraga Parmit.		
	ddress:			
			Zip Code:	
			zip code.	
6. Briefly explain exte		at Area and Loc	cation are you requesting. Please attach maps	
7. Type of equipmen	t to be utilized. If required, h	nave you applied	l for any special permits/leases? Please expla	in.
			eneral public's safety? If yes, explain. No	
and correct to the bes			tion, including any forms attached is complet tybe terminated sooner if by mutual agreemen	
Signature:			<mark>Date:</mark>	
	***SNC Land De	epartment Off	•	• • • • •
Record #			Date received:	
\$500 non-refundable	Land Use Application Fee p	oaid date & payn	ment number:	
Area:	Location:		Map:	
			Expires:	
			Photo's:	
			Other Permits:	