

P.O. Box 905 Nome, Alaska 99762 (907) 387-1200, Fax (907) 443-3063

## **Application for Grazing Permits**

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.

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1. 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 depicting area, existing trails & te		ocation are you requesting. Please attach maps les for consideration.	
7. Type of equipment to be utiliz	ed. If required, have you appli	ed for any special permits/leases? Please explain	
8. Are there any reasons that such	n activities could endanger the	general public's safety? If yes, explain. No	
5 5	wledge. Such permit or lease n	cation, including any forms attached is complete naybe terminated sooner if by mutual agreement	
Signature:		<mark>Date:</mark>	
* * *	SNC Land Department C	office Use Only***	
Record #	Date received:		
\$500 non-refundable Grazing Ap	plication Fee paid date & payn	nent number:	
3 Year Term: Commence:	Expires:	Map:	
State of Alaska & Federal Permit	Liability Insurance:		
		•	
		Butchering Facility:	
Reindeer Drive Area	Fawning Area	USDA Certification:	