



Sitnasuak Native Corporation Land Department  
214 Front Street, Second Floor  
Nome, Alaska 99762  
Phone: (907) 387-1200  
Email: land@snc.org

## Application for Fisheries Permit or Lease

Please complete Sections 1, 2, and 3 prior to submitting your application. You will need to sign, date, and submit your application to the Sitnasuak Native Corporation Land Department. If the application is incomplete, it will be returned to the applicant. Deadline for Applications is September 30th of each year. Any Permit is subject to Sitnasuak Native Corporation Land Use Policy.

**Application: New \_\_\_\_\_ or Renewal \_\_\_\_\_**

### Section 1 – Fisheries Request

Fisheries Requested For:

1) Fish Hatchery Lease:

2) Fish Research Permit:

Name, Local Contact and Affiliation:

Current Mailing Address:

City:

State:

Zip Code:

Contact Phone Number:

Email Address:

### Section 2 – Permit or Lease Information

Briefly explain extent of activity proposed.

State the area and Location you are requesting? Please attach maps depicting area, existing trails and terrain, photos, or any other items for consideration.

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

Is there any reason that the activity you are requesting a permit or lease for could endanger the general public's safety? Yes: \_\_\_\_\_ No: \_\_\_\_\_ If you answered yes, please explain below.

### **Section 3 – Acknowledgement and Signature**

By initialing and signing below, you are hereby certifying that all the information provided in this application, including any forms attached are complete and correct to the best of your knowledge.

<b>Printed Name:</b>	<b>Date:</b>
<b>Signed Name:</b>	

**SNC Land Department Office Use Only**

Record # \_\_\_\_\_ Date Received: \_\_\_\_\_

**Fisheries Non-Refundable Application Fee:**

\$500.00 Fee Paid Date \_\_\_\_\_ and Payment Number \_\_\_\_\_

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

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

Commence Date: \_\_\_\_\_ Expires: \_\_\_\_\_ Size: \_\_\_\_\_

Activity Plan: \_\_\_\_\_

Size: 1 Acre: \_\_\_\_\_ 2 Acre: \_\_\_\_\_

Other Permits: \_\_\_\_\_