

NOTICE: In accordance with the Paperwork Reduction Act of 1995 (44 U.S.C. 3501, et seq.) and the Privacy Act of 1974 (5 U.S.C. 552a) please be advised that:

1. The permitting of compatible economic and public uses on lands of the National Wildlife Refuge System is authorized by: (a) the National Wildlife Refuge System Administration Act (16 U.S.C. 668dd-ee) as amended by the National Wildlife Refuge System Improvement Act of 1997 (Pub. L. 105-57); (b) the Refuge Recreation Act (16 U.S.C. 460k-n); (c) Bald Eagle Protection Act (16 U.S.C. 663a); (d) Endangered Species Act of 1973 (16 U.S.C. 1539); (e) Migratory Bird Treaty Act (16 U.S.C. 703-711); (f) Marine Mammal Protection Act of 1972 (16 U.S.C. 1371-1383); (g) Lacey Act (18 U.S.C. 42 and 44); and (h) Tariff Classification Act of 1962 (19 U.S.C. 1202).

2. Public and economic uses of national wildlife refuges may be authorized upon a determination that such uses are compatible with the purpose(s) for which the refuge was established and the mission of the National Wildlife Refuge System, and are not inconsistent with public safety. The action also must be in accordance with provisions of all laws applicable to the area, consistent with the principles of sound fish and wildlife management and otherwise in the public interest.

3. The application form will be used by U.S. Fish and Wildlife Service personnel to evaluate the qualifications and conclude the eligibility of the applicant. Consistent with 50 CFR 36.41(d)(2), applicants may present the application for noncompetitively issued permits verbally, if he/she is unable to prepare a written application. Applicants are required to provide their social security or taxpayer identification number for activities subject to collection of fees by the Service (31 U.S.C. 7701).

4. Routine use disclosures may also be made (1) to the U.S. Department of Justice when related to litigation or anticipated litigation; (2) of information indicating a violation or potential violation of a statute, regulation, rule, order or license to appropriate Federal, State, local or foreign agencies responsible for investigating or prosecuting the violation or for enforcing or implementing the statute, rule, regulation, order or license; (3) from the record of an individual in response to an inquiry from a Congressional office made at the request of that individual (42 FR 19083; April 11, 1977)

5. Information requested in this form is purely voluntary, but failure to answer questions may jeopardize eligibility to receive permits. Response is not required unless a currently valid Office of Management and Budget (OMB) control number is displayed.

6. The public reporting burden for this information collection varies based on the specific refuge use being requested. The relevant burden estimate ranges from 20 minutes to 1.5 hours for each noncompetitively bid permit, to 30 hours for each competitively awarded permit. This burden estimate includes time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of the form to the Service Information Collection Clearance Officer, Fish and Wildlife Service, Mail Stop 222, Arlington Square, U.S. Department of the Interior, 1849 C Street, N.W., Washington, D.C. 20240.

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FOR OFFICE USE ONLY: SUP # _____

1) Please type or print legibly in ink. Answer all questions completely or mark "N/A" if not applicable.

APPLICANT NAME:	
BUSINESS NAME:	
TAXPAYER IDENTIFICATION NUMBER, or SOCIAL SECURITY NUMBER:	
PRIMARY ADDRESS: (Business Address)	
ALTERNATE ADDRESS:	
PRIMARY PHONE NUMBER:	
ALTERNATE PHONE NUMBER:	
DATES PHONE NUMBERS VALID:	
FAX NUMBER:	
E - MAIL ADDRESS:	
AS AN APPLICANT, ARE YOU: (Mark one box wi	th "X")
 { } INDIVIDUAL { } CORPORATION { } PARTNERSHIP/ASSOCIATION { } GOVERNMENT/STATE AGENCY { } OTHER	

If you are an INDIVIDUAL or PARTNERSHIP, are you also a citizen(s) of the United States?

YES_____ NO_____

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NATIONAL WILDLIFE REFUGE 2)

Mark with an X the refuge you are submitting this application for:

Alaska Maritime NWR	<u> </u>
Alaska Peninsula/Becharof NWR	Koyukuk/Nowitna NWR
Arctic NWR	Selawik NWR
Innoko NWR	Tetlin NWR
Izembek NWR	Togiak NWR
Kanuti NWR	Yukon Delta NWR
Kenai NWR	Yukon Flats NWR

SPECIAL USE PERMIT ACTIVITIES 3)

Mark with an X the type of activity or use you are submitting this application for, and provide specific information requested below:

- Guided/Outfitted Hunting Big Game. Specify species hunted:
- Guided/Outfitted Hunting Migratory Birds. Specify species hunted:
- ____ Guided/Outfitted Hunting Small Game or Upland Birds. Specify species hunted:
- Guided Sport Fishing. Specify species fished:
- Guided River or Float Trips. Specify type of boat and if motorized or non-motorized:
- Guided Recreation -Other. Specify type of activities guided:
- Outfitted Recreation Other. Specify type of activity and equipment provided:
- ____ Air Taxi FAA certified, point to point aircraft transportation.
- Air Transporter Aircraft transportation to big game hunters in the field.
- Transporter Other. Specify mode of transportation provided (e.g., boat, horse, snowmachine, etc.): **____** Commercial Photography.
- ____ Other. Describe activity or use below:

Description of proposed activity or use:

Area(s) of use (delineate on USGS topographic maps if applicable):

Estimated starting and ending dates of proposed activity:

Maximum number of clients per day: _____ Per season: ____

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4) Will your business be operating aircraft (not hiring air taxis) within the Refuge?

YES _____ NO ____ If so, will your business be operating aircraft under: (Check one) _____ FAA Regulations Part 91 (Incidental Air) _____ FAA Regulations Part 135 (Air Taxi) (PLEASE PROVIDE A COPY OF YOUR FAA CERTIFICATION.)

List the make, model, wheel/ski/float, color and tail number of all aircraft you own/lease/operate that you will use in your proposed activity.

MAKE	MODEL	WHEEL ()	SKI ()	FLOAT	COLOR	TAIL NUMBER

Name of Air Taxi(s) you plan to use: (Please note that air taxis you use for activities on Refuge lands/waters must be permitted to operate on the Refuge.)

5) Will your business be operating other modes of transportation or access to or within the Refuge?

YES _____NO__

If so, list the type of vessel(s) or vehicle(s) and the maximum passenger capacity of the vehicles and/or vessels (not aircraft) you plan to use within refuge boundaries.

TYPE VESSEL/VEHICLE	MAXIMUM CAPACITY	REGISTRATION NUMBER

6) We require you to carry liability insurance to provide protection for visitors you serve on refuges. Applicants must obtain liability coverage BEFORE we can issue a Special Use Permit for commercial visitor service activities. Refer to the enclosed <u>Insurance Information Sheet</u> for minimum coverage requirements. You must name the U.S. Government as an additional insured. Do you have current liability insurance? YES <u>NO</u> NO ATTACH A COPY OF THE INSURANCE CERTIFICATE.

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7) Within the <u>past 5 years</u>, has the company (entity) or any of the owners of the business been convicted, pled nolo contendere, or forfeited collateral for any violations of State, Federal, or local law or regulations related to fish and wildlife or permit activities? YES _____ NO_____

8) Is the company (entity) or any of the owners of the business <u>now</u> under charges for <u>any</u> violation of State, Federal, or local law or regulations related to fish and wildlife or permit activities? <u>YES</u> <u>NO</u>

9) Within the <u>past 5 years</u>, have any of your current or proposed employees been convicted, pled nolo contendere, or forfeited collateral for <u>any</u> State, Federal or local law or regulations related to fish and wildlife or permit activities: OR are they <u>now</u> under charges for any violation of state, federal or local law or regulations related to fish and wildlife or permit activities? <u>YES</u> <u>NO</u> <u>NO</u>

10) IF YOU ANSWERED "YES" TO QUESTIONS # 7, 8 OR 9, PLEASE GIVE DETAILS IN THE SPACE BELOW. For each violation, provide the: 1) Individual's Name, 2) Date, 3) Charge, 4) Place, 5) Court, and 6) Action Taken. (Use additional sheets if necessary.)

INDIVIDUAL'S NAME	DATE	CHARGE	PLACE	COURT	ACTION

11) If this application is in response to a prospectus for a competitively awarded permit, please provide a detailed response which addresses, at a minimum, the following factors: proposed operations plan; complete above history of violation related questions 7, 8, and 9 for the past 10 years; safety record, training and proposed safety plan; documentation of experience and knowledge applicable to both the proposed activity and delineated use area or general geographical area; complete list and description of property, equipment and accessories; and complete list of clients for same or similar activities during the past three years. (Use separate sheets to complete this question.)

12) Provide a complete list of names, addresses and phone numbers of employees who will be assisting with permit activities on the refuge. Also indicate in what capacity they will be operating (e.g., guide, pilot, camp cook, etc.) Any employee, including the applicant, who will be operating a vehicle, aircraft, or vessel while carrying clients must provide their State drivers license number, pilot certificate number, or applicable vessel operating license number and indicate whether they have had any such licenses suspended or revoked, or have been convicted for driving while under the influence of alcohol or drugs during the past five years. Please use separate sheet to provide this information.

13) False, fictitious or fraudulent statements or representations made in this application may be grounds for revocation of the Special Use Permit and may be punishable by fine or imprisonment (18 U.S.C. 1001). We will consider all information you provide in reviewing this application.

14) Please attach a copy of your State business license and any applicable State or Federal licenses, certifications, and registrations required for the activity you propose to conduct on the Refuge (e.g., State Big Game Guiding License, State Transporter License, FAA Air Taxi Certificate, U.S. Coast Guard License, sport fish guide registration, etc.).

SIGNATURE OF OWNER/AGENT (Attach Proof of Agent) PRINTED NAME DATE

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Check #	Check Amount:	Overpayment:	Additional Amount Needed:	Fee Not enclosed		
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WERE THESE DOCUMENTS ENCLOSED WITH APPLICATION?						
AIRCRAFT INSURANCE: YES NO GENERAL LIABILITY INSURANCE: YES NO						
STATE BUSINESS LIC	CENSE: YES NO O	THER LICENSES/CERTIFI	CATIONS: YES NO			
MISSING DOCUMENTATION						

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