Federal Subsistence Hunt Application			Permit No.	OMB Control No. 1018-0075 Expires 06\30\2019 DESIGNATED HUNTER FEDERAL PERMIT		
Federal Land Unit:		Unit(s) & Subunit(s):		<b>PERMIT NO:</b> PERMIT_NUMBER UNIT: State wide specific to		
Applicant's Name (First, Middle Initial, Last):	Date of Birth (mm/dd/yy):	permit being designated SPECIES:				
Mailing Address:	Ph	Physical Address: PHY_ADDR_SAME		SEASON:		
AK Hunting License Number: Telephone Number:			Community of Primary Residence:	Name of Recipient	Hunting License #	Permit / Ticket #
Applicant's Signature			Issuing Agent (Print):			
XI certify that I am a rural resident as defined by 50 CFR 100.4 and 3 comply with them and applicable regulations as found in 50 CFR 10		and the conditions on the permit and agree to	Date Permit Issued (mm/dd/yy):			
Federal Subsistence Harvest Report			NON-TRANSFERABLE:			
Permit Number: Permittee's Name:			SPECIES:			
	No	C = Caribou S = Sheep D = Deer X = Muskox M = Moose G = Goat	SEASON END:	HUNT CONDITIONS: See Back		
Permit / Name of Recipient Ticket #		Unit / # Harvested ubunit Species Male Female	<ul> <li>DUE DATE:</li> <li>Designated Hunter: means a Federally qualified subsistence hunter who may take all or a por- tion of another Federally qualified</li> </ul>	USER_NAME		
				Print Name		
				Hunter's Signature		
			hunter's harvest limit(s) only un- der situations approved by the Board.			
4. PLEASE MAIL - Thank you for your cooperatio	 					

FWS Form 3-2327 Rev. 03/2017

## **Conditions of the Permit:**

In accordance with the Privacy Act (5 U.S.C. 552a) and the Paperwork Reduction Act (44 U.S.C. 3501), please note the following information. This information collection is authorized by the Alaska National Interest Lands Conservation Act and associated regulations. The Federal Subsistence Board will use this information to manage fish and wildlife resources for subsistence uses. It is our policy not to use your name for any other purpose. We will maintain this information in accordance with the Privacy Act. Your response is voluntary, but is required to obtain or retain a benefit. We may not conduct or sponsor and you are not required to respond to an information collection unless it displays a currently valid OMB control number. OMB has approved this information collection and assigned OMB Control No. 1018-0075. We estimate it will take you about 15 minutes to complete the application and record your harvest. This burden estimate includes time for reviewing instructions, gathering data, and completing and reviewing the form. You may direct comments regarding the burden estimate or any other aspect of the form to the Information Collection Clearance Officer, Division of Policy, Performance, and Management Programs, U.S. Fish and Wildlife Service, 5275 Leesburg Pike, Falls Church, VA 22041-3803.

> U.S. Fish and Wildlife Service Office of Subsistence Management, M/S 121 1011 E. Tudor Rd. Anchorage, AK 99503-6199

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

OFFICIAL BUSINESS PENALTY FOR PRIVATE USE \$300



POSTAGE WILL BE PAID BY US FISH AND WILDLIFE SERVICE

US FISH AND WILDLIFE SERVICE

Wildlife needs your cooperation Good management helps ensure that animals will be available to hunt in future years. Harvest information is a tool that can be used to help understand and maintain healthy wildlife populations, there-by providing for continued subsistence opportunity. Cut along the dotted line

Mailing

Before

this

Remove