Federal Subsistence Hunt Application							Permit No.	DESIGNATED HUNTER FEDERAL PERMIT		
Federal Land Unit: Unit(s) & Subunit(s):							PERMIT NO: PERMIT_NUMBER			
Applicant's Name (First, Middle Initial, Last):					Da	Date of Birth (mm/dd/yy): UNIT: State wide specific to permit being designated				
								s	PECIES:	
Mailing Address:			Physical Address: PHY_ADDR_SAME				SEASON:			
								Name of Recipient	Hunting	Permit / Ticket #
AK Hunting License Number: Telephone Number:					Commun	ity of Primary Residence:	Name of Necipient	LICCIIGC #	HONGE #	
Applicant's Signature						Issuing A	Agent (Print):			
XI certify that I am a rural resident as defined by comply with them and applicable regulations as			understand the cor	nditions on the	permit and agree to	Date Pe	ermit Issued (mm/dd/yy):			
Federal Subsistence Ha	rvest Repo	ort				NC	ON-TRANSFERABLE:			
Permit Number:							SPECIES:			
Permittee's Name:							0. 20.20.			
Did you hunt as a Designated Hunter? Yes No List All Persons for Whom You Hunted:			C = Caribou S = Sheep D = Deer X = Muskox M = Moose G = Goat				SEASON END:	HUNT CONDITIONS: See Back		
Name of Recipient	Permit / Ticket # Harvest Location		Unit / # Harvested Subunit Species Male Female		DUE DATE:		USER_NAME			
						Designated Hunter: means a	Print Name			
						Federall	ly qualified subsistence who may take all or a por-	XHunter's Signature		
							nother Federally qualified harvest limit(s) only un-			
							uations approved by the			
						200.01				
4 PLEASE MAIL - Thank you for	vour cooperatio									

Conditions of the Permit:	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									
	OFFICIAL BUSINESS PENALTY FOR PRIVATE USE \$300 BUSINESS REPLY MAIL FIRST CLASS MAIL PERMIT NO. 12874 ANCHORAGE, AK POSTAGE WILL BE PAID BY US FISH AND WILDLIFE SERVICE									
Wildlife needs your cooperation Good management helps ensure that animals	POSTAGE WILL BE PAID BY 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.

Remove this Before Ma

BUSINESS REPLY MAIL

US FISH AND WILDLIFE SERVICE

