OMB Control No.	1018-0075	Expires	06/30/2019

FWS Form 3-2378 Rev. 03/2017

Federal Subsistence Designated Fishing Application				ation	Permit No.				
deral Land Unit: Federal Fish Management Area:									
Applicant's Name (First, Middle Initial, Last): Date of Birth			m/dd/yy):	Telephone Number:					
ing Address: Physical Address:			3:	(Community of Primary Residence:				
Applicant's Signature				1	Issuing Ag	ent (Print):			
(ı	Date Perm	nit Issued (mm/	dd/vv):		
certify that I am a rural resident as defined I on the permit and agree to comply with them				the conditions			,-,-,-		
Federal Subsistence Designated Permit Report		mit Report	Permit Number:	Permit Number:			Report Due:		
			Season: Limit:						
Did way an a bayaabald waamban wa	e this Permit: Yes	No	Permittee's Nan	ne:					
Did you or a household member us									
Name	Permit Numb		Location	Gear		Species	Number Harvested		
			Location	Gear		Species			
			Location	Gear		Species			
			Location	Gear		Species			
			Location	Gear		Species			
			Location	Gear		Species			
			Location	Gear		Species			
			Location	Gear		Species			
			Location	Gear		Species			
			Location	Gear		Species			
			Location	Gear		Species			
			Location	Gear		Species			
			Location	Gear		Species			
			Location	Gear		Species			
			Location	Gear		Species			

Conditions of the Pern	nit:		
	S.C. 552a) and the Paperwork Reduction Act (44 U.S.C. 3501), please note the following informat sociated regulations. The Federal Subsistence Board will use this information to manage fish and v		
name for any other purpose. We will ma	intain this information in accordance with the Privacy Act. Your response is voluntary, but is require	ed to obtain or retain a benefit. We may	not conduct or sponsor and
	ormation collection unless it displays a currently valid OMB control number. OMB has approved th nutes to complete the application and record your harvest. This burden estimate includes time for r		
the form. You may direct comments rega	arding the burden estimate or any other aspect of the form to the Information Collection Clearance e, 5275 Leesburg Pike, Falls Church, VA 22041-3803.		
riograms, 0.3. Fish and Wilding Service	z, 32/3 Leesburg Fike, Fails Church, VA 22041-3003.		
U.S. Fish and Wildlife Serv			
Office of Subsistence Man	agement	11 1 1 11	NO POSTAGE
1011 E. Tudor R. M/S 121	•	11 1 1 11	NECESSARY IF MAILED
Anchorage, AK 99503-619	9		IN THE
			UNITED STATES
OFFICIAL BUSINES	29		
PENALTY FOR PR	VATE USE \$300		
	BUSINESS REPLY MAIL		
	FIRST-CLASS MAIL PERMIT NO. 12874 ANCHORAGE. AK		
L			
	POSTAGE WILL BE PAID BY US FISH AND WILDLIFE SERVICE		
	US FISH AND WILDLIFE SERVICE		
	03 FISH AND WILDER E SERVICE		
Conditions of the Pern	nit:		
	S.C. 552a) and the Paperwork Reduction Act (44 U.S.C. 3501), please note the following informat		-
	sociated regulations. The Federal Subsistence Board will use this information to manage fish and ventain this information in accordance with the Privacy Act. Your response is voluntary, but is require		
you are not required to respond to an inf	ormation collection unless it displays a currently valid OMB control number. OMB has approved the	is information collection and assigned	OMB Control No. 1018-0075.
-	nutes to complete the application and record your harvest. This burden estimate includes time for I arding the burden estimate or any other aspect of the form to the Information Collection Clearance		
	e. 5275 Leesburg Pike. Falls Church. VA 22041-3803.	omoor, Division or Fulley, Ferrolliidlick	, and management

Place Tape Here Place Tape Here