

Use Code: _____
Authorization ID: _____
Contact ID: _____

FS-2700-30 (XX/202X)
OMB No. 0596-0082

**U.S. DEPARTMENT OF AGRICULTURE
FOREST SERVICE**

**APPLICATION FOR PERMIT FOR
ARCHAEOLOGICAL INVESTIGATIONS**

**<USER NOTES FOR AUTHORITY>
<Select all authorities that apply. Delete any that do not
apply.>**

**Authority:
Archaeological Resources Protection Act of 1979,
16 U.S.C. 470aa-mm**

**Antiquities Act of 1906,
16 U.S.C. 431-433**

**Organic Act of 1897
16 U.S.C. 551**

Instructions: Complete and return two copies of this application form and required attachments to the appropriate Forest Service administrative unit. All information requested must be completed before the application will be considered. Use separate pages if more space is needed to complete a section.

1. Name of applicant (individual, institution, corporation, partnership, or other entity)

2. Mailing address

3. Telephone numbers

4. Email addresses

5. Nature of archaeological work proposed

- Survey and recordation
- Limited testing (shovel tests, scrapes, probes)
- Formal testing and/or surface collection (project-specific)
- Excavation and/or removal (project-specific)
- Conservation and protection, e.g., ruin stabilization, restoration, rock art conservation, ARPA damage assessments (project-specific)

6. Location of proposed work (attach additional sheets)

- a. Description of federal lands involved. Specification of state, county, and Forest Service administrative unit where work is to occur, using best available data, e.g., global positioning satellite coordinates, Universal Transverse Mercator coordinates, township, range and section (cadastral) subdivisions, or metes and bounds. Readable copy of map at appropriate scale showing specific areas for which permit is desired.
- b. Identification of archaeological or other cultural resources involved.

7. Duration of proposed work

Duration of entire project: From To

Duration of fieldwork: From To

8. Principal investigators

Name of individuals responsible for planning and overseeing field projects, including supervision of staff and responsibility for the professional quality of resource evaluations and recommendations.

Principal investigators contact information

Telephone numbers:

Email addresses:

<p>9. Field director</p> <p>Name of individuals responsible for carrying out field projects, for technical quality of fieldwork through direct on-the-ground supervision of all aspects of fieldwork and data gathering, for proposing resource evaluations and recommendations for further treatment, and for preparing field records and descriptive reports.</p>	<p>Field director contact information</p> <p>Telephone numbers:</p> <p>Email addresses:</p>
<p>10. Permit holder</p> <p>Name of individual who will be responsible for fulfilling the terms and conditions of the permit or who has authority to bind the entity applying for the permit to its terms and conditions.</p>	<p>Permit holder contact information</p> <p>Telephone numbers:</p> <p>Email addresses:</p>
<p>11. The applicant must attach the following to the application form:</p> <p>a. A description of the purpose, nature, and extent of the work proposed, including how and why it is proposed to be conducted (include research design, methods, and curation).</p> <p>b. A summary of support capabilities, including the location and a description of necessary facilities and equipment, the personnel to be involved in the proposed work, and, in the case of an applicant that is an entity, its organizational structure and staffing.</p> <p>c. A summary of the applicant's experience in completing the kind of work proposed, including similar projects and government contracts and federal permits that were previously held, that are currently in force, with their effective dates, and that are pending or planned, by agency and region or state, reports or publications resulting from similar work, and any other pertinent experience.</p> <p>d. For each individual named in blocks 8 and 9, a resume including education, training, and experience in the kind of work proposed and in the role proposed.</p> <p>e. A written certification, signed by an authorized official of the proposed curatorial facility, attesting to the facility's capability and willingness to accept any collections, records, data, photographs, and other documents generated during the proposed permit term and to assume permanent curatorial responsibility for those materials on behalf of the United States Government pursuant to 36 CFR Part 79. Archaeological and historical artifacts excavated or removed from National Forest System lands and their associated documentation shall remain the property of the United States. Custody of any Native American human remains or cultural items subject to the Native American Graves Protection and Repatriation Act (NAGPRA), 25 U.S.C. 3001-3013, that are removed from National Forest System lands shall be determined in accordance with NAGPRA and its implementing regulations at 43 CFR Part 10.</p>	
<p>12. Proposed publications for results of work conducted under the permit</p>	
<p>13. Signature of individual named in block 10</p>	<p>14. Date signed</p>

PAPERWORK REDUCTION ACT STATEMENT

According to the Paperwork Reduction Act of 1995, a Federal agency may not conduct or sponsor, and a person is not required to respond to, an information collection request unless it displays a valid Office of Management and Budget (OMB) control number. The valid OMB control number for this information collection request is 0596-0082. Response to this information collection request is required to obtain or retain benefits, specifically, a special use authorization. The authority for this information collection request is the Archaeological Resources Protection Act of 1979, 16 U.S.C. 470aa-mm. The time required to complete this information collection request is estimated to average 4 hours per response, including the time for reviewing instructions, searching existing data sources, collecting and maintaining the data needed, and completing and reviewing the information collection request. Send comments regarding this burden estimate or any other aspect of this information collection request, including suggestions for reducing the burden, to Forest Service Information Collections Officer, SM.FS.InfoCollect@usda.gov, with OMB control number 0596-0082 in the subject line.

PRIVACY ACT STATEMENT

Pursuant to 5 U.S.C. § 552a(e)(3), this Privacy Act statement serves to inform you of the following concerning the collection of the information on this form.

Purpose: The Privacy Act of 1974 requires that the Director of Recreation, Heritage, and Volunteer Resources staff and the Director of Lands, Minerals, and Geology Management staff provide the following statements to individuals from whom they request information.

Authority: Collection of this information solicited on this form is authorized by the Archaeological Resources Protection Act of 1979, 16 U.S.C. 470aa-mm.

Routine Uses: The information collected will be used by Forest Service officials to ensure that your use of National Forest System lands is administered in accordance with applicable statutes, regulations, and directives. The information collected from you is retained in the Special Uses Data System (SUDS) and is retrieved by the Forest Service create reports for the Agency's Special Uses Program, generate bills for collection of land use fees for your authorization, monitor compliance with your special use authorization, and other matters pertaining to administration of your special use authorization. SUDS is a component of the Forest Service's Natural Resources Manager database (NRM). A complete list of the routine uses of NRM can be found in the system of records notice associated with this form, FS-24.

Disclosure: The submission of this information is required to obtain or retain benefits, specifically, a special use authorization.

NONDISCRIMINATION STATEMENT

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Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at [How to File a Program Discrimination Complaint](#) and at any USDA office or write a letter addressed to USDA and provide in the letter all the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit the completed form or letter to USDA by (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov.

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