

**STATE OF ALASKA DEPARTMENT OF NATURAL RESOURCES
DIVISION OF MINING, LAND AND WATER**

Northern Region
3700 Airport Way
Fairbanks, AK 99709
(907) 451-2740

Southcentral Region
550 W 7th Ave., Suite 900
Anchorage, AK 99501-3577
(907) 269-8560

Southeast Region
P.O. Box 111020
400 Willoughby, #400
Juneau, AK 99801-1021
(907) 465-3400

**MATERIAL SALE APPLICATION
AS 38.05.550-565; AS 38.05.810(a)**

Receipt Type: 17

Non-refundable filing fee: See current Director's Fee Order for applicable fees.

ADL # _____

Applicant's Name _____ Doing business as: _____
Mailing Address _____ E-mail address: _____
City/State/Zip _____ E-Mail: _____
Message Phone () _____ Work Phone () _____ Fax () _____

Location of material site Designated material Site ADL# _____ DOT MS# _____ Other

legal description: _____

Meridian _____ Township _____, Range _____, Section _____ 1/4 _____ 1/4

Municipality _____ Approximate size of the material site in acres _____

Applicant is at least 18 years old: Yes No.

Quantity of material desired (cubic yards): _____

Length of time requested for removal: _____

When is the removal operation proposed to begin? _____, End?-----

For what purpose will the material be used? _____

Are there any existing permits, leases or authorizations covering any part of the application site? Yes No. If yes, state name and last known address of lessee permittee authorized user:

Name Message Phone Work Phone

Address City State Zip

Are there any improvements on the application site? Yes No. If yes, describe; state their approximate value and the name and address of the last known owner:

Name Message Phone Work Phone

Address City State Zip

Describe the proposed method of excavation, including the type of equipment to be used: _____

How many cubic yards do you propose to remove per month? _____ per year? _____

Describe the type of material, (e.g., coarse, un-sized angular rocks; well-sorted and sized gravel; sand and gravel mixed with some shale; class of rip rap; ballast) _____

If permits are required by other agencies, have they been applied for? Yes No.

Applicant's Signature _____

Date _____

NOTICE: If the proposed material sale is intended to be used for commercial purposes, please include a copy of your business license authorizing you to do business in the State of Alaska. This application will not be considered complete unless accompanied by a sketch map sufficiently detailed to enable the Division of Mining, Land and Water to locate the application site. If the Division of Mining, Land and Water considers it necessary, the applicant may be required to submit a more detailed map or survey plat.

To your knowledge, is the general shoreline in the vicinity of the proposed site undergoing erosion or accretion?
AS 38.05.035(a) authorizes the director to decide what information is needed to process an application for the sale or use of state land and resources. This information is made a part of the state public land records and becomes public information under AS 40.25.110 and 40.25.120 (unless the information qualifies for confidentiality under AS 38.05.035(a)(8) and confidentiality is requested, AS 43.05.230, or AS 45.48). Public information is open to inspection by you or any member of the public. A person who is the subject of the information may challenge its accuracy or completeness under AS 44.99.310, by giving a written description of the challenged information, the changes needed to correct it, and a name and address where the person can be reached. False statements made in an application for a benefit are punishable under AS 11.56.210. In submitting this form, the applicant agrees with the Department to use "electronic" means to conduct "transactions" (as those terms are used in the Uniform Electronic Transactions Act, AS 09.80.010 – AS 09.80.195) that relate to this form and that the Department need not retain the original paper form of this record: the department may retain this record as an electronic record and destroy the original.

ADDITIONAL INFORMATION TO BE COMPLETED IF APPLICATION IS FOR TIDELANDS

Is the applicant the upland owner? Yes No. If not, state the name and address of the upland owner or owners:

Name Message Phone Work Phone

Address City State Zip

State the name and address of the adjacent upland owners:

Name Message Phone Work Phone

Address City State Zip

Is the application site seaward of any lands reserved by the United States for military, lighthouse, national park or national forest purposes, or by the state for state or local government agencies, or other public purposes? Yes No. If yes, state the use of the land and the name of agency: _____

State the distance to the nearest occupied tidelands _____ and the name and address of the occupant:

Name Message Phone Work Phone

Address City State Zip

Have you applied for a U.S. Army Corps of Engineers (COE) permit? Yes No.