



STATE OF ALASKA
DEPARTMENT OF NATURAL RESOURCES
Division of Mining, Land and Water

Land Conveyance Section
550 W. 7th Ave., Suite 640
Anchorage, AK 99501-3576
907-269-8594
dnr.noncompland@alaska.gov

Statewide TTY – 711 for Alaska Relay or 1-800-770-8973

APPLICATION FOR PREFERENCE RIGHT PURCHASE OF STATE LAND

_____ Date

_____ ADL # (assigned by DNR)

APPLICANT INFORMATION

Applicant's Name (please print): _____

Applicant's Name (please print): _____

Applicant's Name (please print): _____

If more than one applicant, please indicate a single individual who will represent all the applicants and be the primary contact. Use this individual's address and contact information below. Applicants must be 18 years of age or older. If the applicant is a corporation or business, please enter the name of the corporation or business and the authorized representative's name. The state will issue a patent only to those named above as applicant(s).

TRUSTS ARE NOT ELIGIBLE TO APPLY FOR A PREFERENCE TO PURCHASE STATE LAND.

Mailing Address: _____

City: _____ State: _____ Zip code: _____

Message Phone: _____ Work Phone: _____ Cell Phone: _____

Email: _____ Fax: _____

If the applicant is a corporation or business, is it registered and licensed to do business in Alaska? Yes No

Is the corporation or business presently in good standing with the Alaska Department of Commerce, Community and Economic Development? Yes No

Please attach a copy of a State of Alaska business license, a Certificate of Good Standing from the State of Alaska, and a resolution or other document authorizing the individual listed above to represent the corporation or business.

Are you currently in default on, or in violation of, any purchase contract, lease, permit or other authorization issued by the Department of Natural Resources under 11 AAC? Yes No

Within the past three years, has the department foreclosed or terminated any purchase contract, lease, permit, or other authorization issued to you? Yes No

PROPERTY INFORMATION

Legal Description: Lot(s) _____ Block/Tract: _____ Name of Subdivision: _____

Survey #: _____ Recorded Plat #: _____ Recording District: _____

Meridian: Copper River Seward Fairbanks Umiat Kateel River

Township(s) _____ North South Range(s) _____ East West Section(s) _____ Acres: _____

Township(s) _____ North South Range(s) _____ East West Section(s) _____ Acres: _____

Borough, municipality, or community: _____

General geographic location (waterbody, landmark): _____

Attach a survey, USGS map or other map and accurately indicate the location of the land you are applying to purchase.

Are there improvements on the land? Yes No. If yes, who owns the improvements?

Describe the improvements and when they were built:

Is the land applied for subject to any existing state leases Yes No, or permits Yes No?

If Yes, the name(s) of the lease or permit is issued under:

ADL # _____

PREFERENCE RIGHT INFORMATION

Check the statutory authority below under which you are applying and provide documentation supporting your qualifications under the selected Statute. You can only check one statutory authority.

- AS 38.05.035(b)(2):** To correct an error or omission of a state or federal administrative agency.
- AS 38.05.035(b)(3):** To correct an error or omission of others that prevented obtaining title to the land; the claimant shows bona fide improvements on the land.
- AS 38.05.035(b)(5):** Used and made improvements to the land before statehood, or are the heir of that person; and continued to use the land up to the time of application, to avoid injustice; may not exceed 5 acres.
- AS 38.05.035(b)(7):** Owner of land adjacent to a remnant parcel of state land the director determined to be unmanageable or to a parcel created by vacation or realignment of a public right-of-way.
- AS 38.05.035(f):** Used land under previous federal authorizations for at least five years and continued with state authorizations after selection, erected a building, and used the land for business purposes producing no less than 25% of the total income of the applicant for the five years immediately preceding the application; may not exceed 5 acres.
- AS 38.05.068:** Former valid U.S. Forest Service permittee on land now owned by the state.
- AS 38.05.102:** Long-term lessee in good standing.

ADDITIONAL REQUIRED INFORMATION

All additional forms must be completed, signed by the applicant(s), and returned with this application form. **Incomplete applications will not be accepted.**

- Agreement to Bear Costs
- Applicant Environmental Risk Questionnaire

In signing this application, the applicant(s) hereby attest(s) that the information herein provided is true and correct to the best of the applicant(s) knowledge. False or incorrect information may result in the application being rejected; the application fee will not be returned.

Signature

Date

Signature

Date

Signature

Date

NOTICE TO APPLICANT:

* This application will not be considered unless accompanied by the appropriate filing fee and completed in full. **THE FILING FEE WILL NOT BE REFUNDED, NOR IS IT TRANSFERABLE.** All checks are to be made payable to the Department of Natural Resources.

* The filing of this application and payment of the filing fee vests the applicant with no right or priority in the lands applied for. It merely expresses the desire to purchase a parcel of land when and if it becomes available. Filing an application serves the purpose of notifying the state that an individual is interested in purchasing land. It is not a claim, nor does it in any way obligate the state to sell land.

* 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, or qualifies for confidentiality AS 43.05.230, AS 45.48, or other state or federal laws. Public information is open to inspection by you or any member of the public. A person who is the subject of the personal information may challenge its accuracy or completeness under AS 40.25.310, 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.

For Department Use Only

Application received date stamp