

STATE OF ALASKA DEPARTMENT OF NATURAL RESOURCES
Division of Mining, Land and Water
Contract Initiation and Revenue Recovery
550 West 7th Avenue, Suite 640, Anchorage, AK 99501
907-269-8594, dnr.cirr@alaska.gov

ASSIGNMENT APPLICATION

ADL Number _____

- Upon receipt of this application, required documents and fees, an interest transfer document will be drafted requiring notarized signatures of all parties. Final approval by DNR is required prior to transfer of interest.
- Completed application and required documents can be submitted electronically to dnr.cirr@alaska.gov or returned to 550 W. 7th Avenue, Suite 640, Anchorage, AK 99501.
- Payment of fees can be made by check or credit card. Checks should be made out to the State of Alaska, Department of Natural Resources and note the ADL number and 'Assignment Fee' on the Memo line and can be submitted to one of the below offices. Payment by credit card can be taken over the phone by the below offices. Payment should be coded as receipt type '13'.

FAIRBANKS

DNR Public Information Center
 3700 Airport Way
 Fairbanks, AK 99709-4699
 Phone: 907-451-2705
 Fax: 907-451-2706
 E-mail: fbx-pic@alaska.gov
 Business Hours:
 8:00 am to 4:30 pm, M-F

ANCHORAGE

DNR Public Information Center
 550 W. 7th Ave., Ste 1360
 Anchorage, AK 99501-3561
 Phone: 907-269-8400
 Fax: 907-269-8901
 E-mail: dnr.pic@alaska.gov
 Business Hours:
 8:00 am to 4:30 pm, M-F

JUNEAU

DNR Southeast Regional Land Office
 400 Willoughby Ave., 4th Floor
 Juneau, AK 99801-1020
 Phone: 907-465-3400
 Fax: 907-500-9011
 E-mail: sero@alaska.gov
 Business Hours:
 8:00 am to 4:30 pm, M-F

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

Assignor Information (Seller)			
Last Name/Business Name	First Name	Middle Name	Suffix
Note: Name provided must be full legal name as it appears on your Agreement.			
Address _____			
City, State, and Zip code _____			
Phone _____		Email _____	
Individuals:	Marital Status: <input type="checkbox"/> Single Person <input type="checkbox"/> Married Person		
Businesses:	Tax ID Number (EIN)	Authorized Representative Full Name	Position
Required document(s) provided:			
<input type="checkbox"/> LLC: Articles of Organization, Operating Management Agreement, or a resolution signed by all members that identifies who the members are and who has the authority to sign on behalf of, legally bind, and pledge assets of the LLC.			
<input type="checkbox"/> Corporation: Articles of Incorporation and Corporate By-Laws identifying who is the authorized signee for the corporation.			

IF MORE THAN ONE ASSIGNOR, COPY THIS PAGE AS APPLICABLE

Assignee Information (Buyer)

Last Name/Business Name	First Name	Middle Name	Suffix
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Note: Name provided must be full legal name as it appears on your Driver's or Business License.

Address _____

City, State, and Zip code _____

Phone _____ Email _____

Required document(s) provided:

- Copy of agreement between Assignor and Assignee of this transfer.
- Completed Environmental Risk Questionnaire.
- Development Plan.
- Performance Guaranty for the amount required in the Lease Agreement.
- Current insurance showing State of Alaska as additional insured.
- Current permits from other agencies if applicable (ex. If project has an associated Special Area Permit, the permit needs to be updated to reference the appropriate entity).

Individuals: Marital Status: Single Person Married Person

Required documents provided: Copy of Photo ID

Businesses:

Tax ID Number (EIN)	Authorized Representative Full Name	Position
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Required document(s) provided:

- Proof of registration for an Alaska LLC or Corporation.
- LLC: Articles of Organization, Operating Management Agreement, or a resolution signed by all members that identifies who the members are and who has the authority to sign on behalf of, legally bind, and pledge assets of the LLC.
- Corporation Articles of Incorporation and Corporate By-Laws identifying who is the authorized signee for the corporation.

Assignee Information (Buyer 2)

Last Name/Business Name	First Name	Middle Name	Suffix
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Note: Name provided must be full legal name as it appears on your Driver's or Business License.

Address _____

City, State, and Zip code _____

Phone _____ Email _____

Required document(s) provided:

- Copy of agreement between Assignor and Assignee of this transfer.
- Completed Environmental Risk Questionnaire.
- Development Plan.
- Performance Guaranty for the amount required in the Lease Agreement.
- Current insurance showing State of Alaska as additional insured.
- Current permits from other agencies if applicable (ex. If project has an associated Special Area Permit, the permit needs to be updated to reference the appropriate entity).

Individuals: Marital Status: Single Person Married Person
 Required documents provided: Copy of Photo ID

Businesses:

Tax ID Number (EIN)	Authorized Representative Full Name	Position
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Required document(s) provided:

- Proof of registration for an Alaska LLC or Corporation.
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- Corporation Articles of Incorporation and Corporate By-Laws identifying who is the authorized signee for the corporation.

IF MORE THAN TWO ASSIGNEES, COPY THIS PAGE AS APPLICABLE

In submitting this form, the applicant certifies that no changes have been made to the original text of the form or any attached documents provided by the Division.

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 under 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.

A non-refundable filing fee may be required to complete application submittal. See current Director's Fee Order for applicable fees.