|  |
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| **SECTION I: APPLICANT INFORMATION** |
| 1. **Applicant:**
 | 1. **Applicant Contact:**
 |
| Name: | Enter Name. | First Name: | Enter First Name. | Last Name: | Enter Last Name. |
| Title: | Enter Title. |
| Mailing Address: | Enter Mailing Address. | *Is the Mailing Address the same as Applicant’s Mailing Address? If “No”, please provide information below:* | [ ]  Yes |
| City: | Enter City. | Mailing Address: | Enter Mailing Address. |
| State: | Enter State. | Zip Code:  | Enter Zip Code. | City: | Enter City. | State: | Enter State. | Zip Code: | Enter Zip Code. |
| Phone: | Enter Phone. | Fax: | Enter Fax. | Phone: | Enter Phone. | Fax: | Enter Fax. |
| Email:  | Enter Email. | Email:  | Enter Email. |
| **SECTION II: THIRD PARTY INFORMATION** (Fill out this section only if you are applying for the Applicant) | **SECTION III: MODIFICATION APPLICATION DATE AND NUMBER** |
| Third Party Company Name: | Enter 3rd Party Company Name. | Application Date (For Division Use Only): |
| First Name: | Enter First Name. | Last Name: | Enter Last Name. |  |
| Title: | Enter Title. |  |
| Mailing Address:  | Enter Mailing Address. |  |
| City: | Enter City. |  |
| State: | Enter State. | Zip Code: | Enter Zip Code. |  |
| Phone: | Enter Phone. | Fax: | Enter Fax. |  |
| Email: | Enter Email. |  |
| Describe the affiliation to the Applicant: | Original MLUP Number: |
| Describe your affiliation to the Applicant. | Enter MLUP Number. |
|  **SECTION IV: MODIFICATION DESCRIPTION** |
| 1. **Project Name:**
 | Enter Project Name. |
| 1. **Proposed Start Date:**
 | Enter Start Date. |
| 1. **Project Activities:**
 |
| 1. Describe what and where:
 |
| Click here to enter text. |
| 1. Number of Line Miles (2D) Click here to enter text and/or Square Miles (3D) Click here to enter text.
 |
| 1. Waste Management:

Click here to enter text. |
| 1. Staging and Storage Areas:

Click here to enter text. |
| 1. Airstrips and Landing Zones:

Click here to enter text. |
| 1. Historical Properties and Cultural Resources:

Click here to enter text. |
| 1. Anadromous Fish Streams and Other Streams:

Click here to enter text. |
| 1. **Associated Structures:**
 |
| 1. Structures:

Click here to enter text. |
| 1. Other:

Click here to enter text. |
| 1. **Type of Equipment:**
 |
| Click here to enter text. |
| 1. **Other:**
 |
| Click here to enter text. |
| **SECTION V: SEQUENCE AND SCHEDULE OF OPERATIONS** |

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| Are supplemental pages for Sequence and Schedule of Activities included in Appendix B? [ ]  Yes [ ]  No |

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| **Project Milestone #** | **Project Milestone** | **Proposed Start Date** | **Proposed End Date** |
| 1. | Enter Milestone. | Enter Date. | Enter Date. |
| 2. | Enter Milestone. | Enter Date. | Enter Date. |
| 3. | Enter Milestone. | Enter Date. | Enter Date. |
| 4. | Enter Milestone. | Enter Date. | Enter Date. |
| 5. | Enter Milestone. | Enter Date. | Enter Date. |
| 6. | Enter Milestone. | Enter Date. | Enter Date. |
| 7. | Enter Milestone. | Enter Date. | Enter Date. |
| 8. | Enter Milestone. | Enter Date. | Enter Date. |
| 9. | Enter Milestone. | Enter Date. | Enter Date. |
| 10. | Enter Milestone. | Enter Date. | Enter Date. |
| **SECTION VI: LAND STATUS** |
| 1. **State of Alaska Surface Lands:**
 |
| Are supplemental pages for Land Status included in Appendix B? [ ]  Yes [ ]  No |

|  |  |
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| Meridian, Township, Range, And Section(s): | Click here to enter text. |
| Oil And Gas Mineral Estate Lessee: | Click here to enter text. |
| Access Authorization(s): | Click here to enter text. |
| Special Use Lands: | Click here to enter text. |
| Jointly Managed Lands:  | Click here to enter text. |
| Other Considerations: | Click here to enter text. |
| **Project Activities/Components** | **GPS Coordinates** |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |

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| **SECTION VII: PERFORMANCE GUARANTY** |
| Bonded Company: | Enter Bonded Company. |
| Type: | Enter Bond Type. | Number: | Enter Bond Number. | Amount: | Enter Bond Amount. |
| Bonding Company: | Enter Bonding Company. |
| Mailing Address: | Enter Mailing Address. |
| City: | Enter City. | State: | Enter State. | Zip Code: | Enter Zip Code. |
| Phone: | Enter Phone. | Fax: | Enter Fax. | Email: | Enter Email. |
| **SECTION VIII: INSURANCE** |
| **Comprehensive General Liability Insurance:** |
| Amount of Insurance: | Enter Amount of Insurance. |
| Insurer Name: | Enter Insurer Name. |
| Mailing Address: | Enter Mailing Address. |
| City: | Enter City. | State: | Enter State. | Zip Code: | Enter Zip Code. |
| Phone: | Enter Phone. | Fax: | Enter Fax. | Email: | Enter Email. |
| Amount of Insurance: | Enter Amount of Insurance. |
| **SECTION IX: GLOSSARY OF TERMS** |

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| Are supplemental pages for Glossary of Terms included in Appendix B? [ ]  Yes [ ]  No |

|  |  |  |
| --- | --- | --- |
| **Term #** | **Term** | **Term Definition** |
| 1 | Enter Term. | Enter Term Definition. |
| 2 | Enter Term. | Enter Term Definition. |
| 3 | Enter Term. | Enter Term Definition. |
| 4 | Enter Term. | Enter Term Definition. |
| 5 | Enter Term. | Enter Term Definition. |
| 6 | Enter Term. | Enter Term Definition. |
| 7 | Enter Term. | Enter Term Definition. |
| 8 | Enter Term. | Enter Term Definition. |
| 9 | Enter Term. | Enter Term Definition. |
| 10 | Enter Term. | Enter Term Definition. |
| **SECTION X: CONFIDENTIALITY** |
| The undersigned hereby requests that each page/section of this application marked confidential be held confidential under AS 38.05.035(a)(8). |
| APPLICANT CONTACT: |
|  |  |  |  |  |  |  |
| Sign here. |  | Enter Name. |  | Enter Title. |  | Enter Date. |
| Signature | Name | Title | Date |

|  |
| --- |
|  **APPENDIX A: MAPS** |

Include maps here.

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| **APPENDIX B: OTHER** |

Include other information here.