

**Northwest Arctic Borough**

**Title 9 Land Use Permit Application for Commercial Transporters**  
**2011 Calendar Year**

Once approved, this document will be incorporated into the administrative record for a zoning permit of the Northwest Arctic Borough

- Commercial transporter means: a person or business that transports by any means (air, boat, hike, snow machine, ATV, etc) a person or persons for compensation (borough code 9.30.120).
- Please type or print legibly in ink.
- Answer all questions completely or mark "N/A" if not applicable.
- Providing incomplete or inaccurate information may result in the denial, suspension or revocation of a permit.
- Permit applications are due at least 10 days before the first transport in the 2011 calendar year; however, we request operators to submit applications as soon as possible or by July 8, 2011, for timely review and processing.
- Questions or need assistance: call the Land Specialist at the Northwest Arctic Borough Planning Department at 907-442-2500 / or e-mail [cgregg@nwabor.org](mailto:cgregg@nwabor.org)

**Applicant Information**

**Date of Application** \_\_\_\_\_

1. Applicant name: \_\_\_\_\_
2. All other names and aliases used by the applicant: \_\_\_\_\_
3. Applicant Date of Birth: \_\_\_\_\_
4. Applicant Mailing Address \_\_\_\_\_  
\_\_\_\_\_
5. Applicant Residential/Physical Address: \_\_\_\_\_  
\_\_\_\_\_
6. Phone numbers: Daytime \_\_\_\_\_ Cell \_\_\_\_\_

Upon review of this application, the NAB reserves the right to require the submission of additional informational material. To avoid delays, the NAB recommends that the applicant attach all information necessary to complete the review process.

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7. Has the applicant been convicted of a felony or misdemeanor in Alaska or any other jurisdiction within the past 5 years?      Yes \_\_\_\_\_      No \_\_\_\_\_

*If yes, give the date of the conviction, the offense and location of the court*

**Business Information**

8. Business Name: \_\_\_\_\_

9. Business Address: \_\_\_\_\_

10. Business Phone: \_\_\_\_\_      Business Fax: \_\_\_\_\_

11. E-mail address: \_\_\_\_\_

**Transportation Information**

12. :Please provide the below information for each applicant or employee commercially transporting persons associated with this permit:

<i>Full and true name of who will be transporting persons commercially (applicant, employees, etc)</i>	<i>All other names and aliases used</i>	<i>Birth Date</i>	<i>Has the person been convicted of a felony or misdemeanor in Alaska or any other jurisdiction within the past 5 years? If yes, give the date of the conviction, the offense and location of the court.</i>

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13. Please provide the following transport methods and vehicle/aircraft information to be operated associated with this permit:

*Circle all the commercial transport methods proposed:*

Aircraft      Boat      ATV      Snow machine      Guided Hike

Other (please describe): \_\_\_\_\_

<i>Vehicle/Aircraft Type and Make</i>	<i>Year and Model</i>	<i>License Plate / Tail Number</i>

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14. Provide the planned calendar year schedule (attach additional sheets as needed):

<p><b><u>Trip 1:</u></b> Start date: End date: Location/Destinations:</p> <p>Number of persons: Vehicle (s):</p>	<p><b><u>Trip 2:</u></b> Start date: End date: Location/Destinations:</p> <p>Number of persons: Vehicle (s):</p>
<p><b><u>Trip 3:</u></b> Start date: End date: Location/Destinations:</p> <p>Number of persons: Vehicle (s):</p>	<p><b><u>Trip 4:</u></b> Start date: End date: Location/Destinations:</p> <p>Number of persons: Vehicle (s):</p>
<p><b><u>Trip 5:</u></b> Start date: End date: Location/Destinations:</p> <p>Number of persons: Vehicle (s):</p>	<p><b><u>Trip 6:</u></b> Start date: End date: Location/Destinations:</p> <p>Number of persons: Vehicle (s):</p>
<p><b><u>Trip 7:</u></b> Start date: End date: Location/Destinations:</p> <p>Number of persons: Vehicle (s):</p>	<p><b><u>Trip 8:</u></b> Start date: End date: Location/Destinations:</p> <p>Number of persons: Vehicle (s):</p>
<p><b><u>Trip 9:</u></b> Start date: End date: Location/Destinations:</p> <p>Number of persons: Vehicle (s):</p>	<p><b><u>Trip 10:</u></b> Start date: End date: Location/Destinations:</p> <p>Number of persons: Vehicle (s):</p>

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Please indicate all appropriate categories of lands crossing/landing:

- Federal Land       State Land       Municipal Land       Private Land

*Note: it is the applicant's responsibility to obtain land owner permission.*

The above is located within the following borough zone(s) (*indicate all appropriate categories*):

- Village Zone                                       Commercial Recreation Conservation District  
 General Conservation District       Subsistence Conservation District  
 Resource Development                       Transportation Corridor

15. List other permits and licenses obtained in connection with the activity:

<i>Name of Agency Issuing Permit</i>	<i>Permit Information</i>	<i>Date of Expiration</i>
	Type of Permit Number Date of Issue	
	Type of Permit Number Date of Issue	
	Type of Permit Number Date of Issue	
	Type of Permit Number Date of Issue	
	Type of Permit Number Date of Issue	

**Fees**

An application shall also include payment to the:

Northwest Arctic Borough Planning Department  
PO Box 1110  
Kotzebue, AK 99752  
Attention: Commercial Transporter Permitting

Indicate amount due:

_____ \$350.00	_____ \$500.00
If the number of trips is 10 or less.	If the number of trips is more than 10.

**Permit Application Certification**

I, the applicant or person duly authorized by the applicant, hereby certify that the foregoing statements and information contained in and submitted with this application are true and correct to the best of my knowledge and belief, and that the application is hereby made for a Northwest Arctic Borough (NAB) Permit for the above described use within the boundaries of the NAB.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Any permit or approval granted hereunder is limited solely to the project as described by the applicant in this application and supporting documents.

Failure of the applicant to provide true and correct statements and information in connection with this application, without regard to the intent, shall render any permit issued by the NAB hereunder, immediately void and without effect.

Any permit or approval granted by the NAB is conditioned on the applicant receiving all required state or federal permits and/or consistency determination. A proposed use cannot take place until all local, state, and/or federal permits are obtained.

**Quyaana – thank you for completing  
Submit permit applications with fees to the:  
Northwest Arctic Borough Planning Department  
PO Box 1110  
Kotzebue, AK 99752  
Attention: Land Specialist**

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**Do not write below this line, for NAB Planning Department Use Only**

Date Received: \_\_\_\_\_ Tracking Reference # \_\_\_\_\_

Planning Staff Received and Logged Application: \_\_\_\_\_

Planning Staff Assigned to Review/Process Application: \_\_\_\_\_

Zone (s): \_\_\_\_\_

NWAB Use(s): \_\_\_\_\_

Permit(s) Type (circle):                      AA                      UP                      CU

Fee Amount(s): \$ \_\_\_\_\_

Payment of Fees:

<i>Method</i>	<i>Amount &amp; Date Received</i>	<i>Receipt # &amp; Date Mailed</i>	<i>Notes/Comments</i>
Cash	\$	#	
Check	\$	#	
Total	\$		

The foregoing permit is hereby recommended to be:

- Granted according to the issued permit(s)
- Denied based upon the information in the administrative record

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Final Review: Title 9 Administrator

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Date