

**NORTHWEST ARCTIC BOROUGH
TITLE 9 PERMIT APPLICATION
Project Questionnaire**

Once approved, this document will be incorporated into the administrative record for a title 9 land use permit of the Northwest Arctic Borough

Please type or print legibly in ink. Answer all questions completely or mark "N/A" if not applicable. All required attachments, such as maps and plan/project drawings, must be included with your packet with the appropriate fee. *An incomplete packet may be returned.* Questions or need assistance: call the Northwest Arctic Borough Planning Department at 907-442-2500

Applicant Information

Date of Application: _____

Name of Applicant

Contact Person

Address

Address

City, State, Zip Code

City, State, Zip Code

Phone Number

Fax Number

Phone Number

Fax Number

E-mail Address

E-mail Address

Web Page

Corporation, LLC and Partnership applicants must attach:

- *A copy of proof of good standing and/or a current license to conduct business in the State of Alaska, and*
- *The names and addresses of any individual or entity holding in excess of 20% of the voting shares of stock in the corporation, 20% of the membership interests in the LLC or any partner with 20% partnership interest in the partnership.*

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.

Project Information

Please provide a brief description of your project: _____

Proposed starting date of the project: _____ End date of your project: _____

Attached a detailed description of your project including:

1. All associated facilities such as access roads, caretaker facilities, waste disposal sites, etc.
2. Project timeline for completion of all major activities in the proposal
3. A site plan depicting all proposed actions
4. Any topographic maps, plan drawings, or other supporting documentation that would facilitate review of your project
5. Listing of any state and federal permits and/or permit applications needed for the project.

Describe any state, federal, and/or local permit(s) you have received in the past for a *similar* use at a *different* location:

Project Location

Township: _____ Range: _____ Section: _____

Meridian: _____ USGS Map: _____

Name of the nearest: (a) Borough Community _____

(b) Land Feature _____ (c) Body of Water _____

The project is on (*indicate all appropriate categories*) *:

- Federal Land State Land Municipal Land Private Land

* *Attach proof of landowner permission*

The project is located within the following borough zones (*indicate all appropriate categories*):

- Village Zone Habitat Conservation District
 General Conservation District Subsistence Conservation District
Subsistence Sub-district area _____
 Resource Development Transportation Corridor

Project Characteristics

Please state the “Proposed Use” or Project Activities that best characterizes the entire project (reference title 9.12 <http://codepublishing.com/ak/nwarcticborough.html>) :

If the project consists of more than one use, state all applicable uses/project activities. The Northwest Arctic Borough reserves the right to reject the applicant’s characterization of uses and reclassify the uses associated with any project.

Do you currently have any state or federal approval for this project? Approval means permit or any other form of authorization:

Approval Type	Approval #	Expiration Date	Agency Review ID #

Will you be placing structures or fill across in any of the following:

Yes	No	Type of water/wetland	Name of water body/wetland
		Tidal (ocean) waters	
		Streams	
		Rivers	
		Lakes	
		Wetlands *	

* This includes work in running water or on ice, within the active flood plain, on islands, or the face of the banks. If you are not certain whether your proposed project is in a wetlands, contact the U.S. Corps of Engineers for a wetlands determination at 1-800-478-2712.

Will you be using any of the following resources?

Yes	No	Type of Resource	Amount	Location of source for resource if other than project site (include township, range, section, meridian, USGS map reference)
		Timber		
		Rock		
		Sand		
		Gravel		
		Peat		
		Soil		
		Overburden		
		Other (describe)		

Will you be using any fresh water? Yes No

Amount (gallons per day): _____ Source: _____ Use: _____

Will you be developing, constructing, installing, or altering a public water system?

Yes No If yes, please explain in the plan documents attached.

Will you be storing any fuel (gasoline, heating oil, etc)? Yes No

If yes, Amount (total storage capacity) _____ gallons

Location(s) _____

Fuel storage method _____

Describe how the fuel will be transported to the project site(s):

Describe how the fuel will be removed at the end of the project:

Will you be traveling across tundra? Yes No

If yes, vehicle(s) types _____

Describe the methods to reduce impact to tundra: _____

Will there be development in the floodplain or flood prone area(s)? Yes No

If yes, describe area _____

Describe the methods/measures to ensure reasonable safety from flooding and/or flood damage:

Permit Fees

Do you request a reduction or waiver in the permit fees? Yes (complete the below)

No Amount enclosed with the application: \$ _____
 Make payment to the: Northwest Arctic Borough Planning Department
 PO Box 1110 / Kotzebue, AK 99752
 Attention: Title 9 Permitting

If you request a reduction or waiver, describe the reason you believe the fee should be reduced or waived:

And state the fee amount you would be able to pay: \$ _____

- *If a reduction of the fee is requested, please include payment of the fee you request.*
- *You will be advised of the decision regarding payment of the fee.*
- *The balance determined to remain due must be paid in order for your application to be accepted as complete.*

Certification Statement

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 questionnaire 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 application with fees to the:
Northwest Arctic Borough Planning Department
PO Box 1110 / Kotzebue, AK 99752 / Attention: Title 9 Permitting**

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):
- Village Zone (V)
 - General Conservation District (GC)
 - Resource Development (RD)
 - Habitat Conservation District (HC)
 - Subsistence Conservation District (SC)
Subsistence Sub-district area _____
 - Transportation Corridor (TC)

NWAB Use(s): _____

Permit Type (circle): Minor Use Major Use Conditional Use Master Plan

Fee Amount(s): \$ _____

Payment of Fees:

<i>Method</i>	<i>Amount & Date Received</i>	<i>Receipt # & Date Mailed</i>	<i>Notes/Comments</i>
Cash	\$	#	
Check	\$	#	
Waiver of Fees (whole or partial)	\$	#	Approval Signature by the Planning Director
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

Final Review: Title 9 Administrator _____

Date _____