

(3) **Big Game Transporter?** Yes No N/A
 License Number _____ Expiration _____
(Licensed Big Game Transporters must attach or send in a copy of license)

(4) **Air Taxi Operators:** Please indicate type;
 ___ Part 135 ___ Part 91 ___ Foreign Air Carriers *(Attach Copy of FAA Letter of Authorization)*
 Please attach or send in a copy of your FAA operating certificate or Letter of Authorization (foreign air carriers.)

(5) **WATERCRAFT (Additional Information)**
 Please provide this additional information on watercraft you will use.

Check the State’s website for boat registration info: <http://doa.alaska.gov/dmv/reg/boat.htm>

Type of Watercraft (e.g. Skiff, Kayak, Canoe, Raft)	DMV Registration # OR US Coast Guard Doc #	Registration Expiration Date	Number of Passengers	Color(s)	Name of Watercraft (if applicable)	Motorized? (yes/no)

6. AIRCRAFT (Additional Information)

Please provide the color scheme for your Aircraft

Tail Numbers Color(s) Floats Wheels Skis

* When specifying locations, do not give the park's name as a response, provide specific locations.

Name of Park Unit:		<input style="width: 100%; height: 30px;" type="text"/>
Services List services you (the Applicant) will provide	Locations to be Used Specify locations within this park where services will be provided	
1.	1.	
2.	2.	
3.	3.	
4.	4.	
5.	5.	
6.	6.	
(1) What is the number of Guides/Leaders per trip for this park unit?		<input style="width: 100%; height: 25px;" type="text"/>
(2) What is the number of clients/participants per trip for this park unit?		<input style="width: 100%; height: 25px;" type="text"/>
(4) What is the estimated date you want to begin operating in this park unit?		<input style="width: 100%; height: 25px;" type="text"/>

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