

## Application for *Scientific Research/Collection Permit*Alabama State Parks

<u>Return</u> completed application, project proposal and curriculum vitae to: Alabama State Parks, ATTN: Natural Resource Section, 64 N. Union Street, Suite 518, Montgomery, AL 36130-1452 or email to Tasha.Simon@dcnr.alabama.gov

## Please allow 4-6 weeks for processing.

1.	Applicant Information:         Name:				Application Date:		
					Email:		
	Mailing Address:				Work Phone:		
	· ·				Cell Phone:		
						-	
		(City, State)	(Zip Code)				
		(- 5),					
2.	Sponsoring Institution	on:	(Name and mailing add	June of A man	an an Firms		
				iress oj Ageni	Ly or Firm)		
N	Name, Title and Phon		stitution Official:				
_	(Someone other than applica		•	Name		Title	Phone Number
3.	Collection Purpose (	_	Scientific Research			Biomonitoring/Enviro	onmental Assessment
	proposal for each pu Proposal may cover		<ul><li>☐ Museum Collection</li><li>☐ Educational / Class Ex</li></ul>	ercise	Ц	Other (specify):	
	purposes):						
	Entering caves?						
5.	List individuals colle	ecting as sub-p	permitees of Scientific C  Mailing Address		Permit ap	oplicant ( <i>if more the</i>	ın 4, attach list):
	ivame		mulling Address	ana eman			
6.	Period of Time Resear	ch Will Be Cond	lucted: Start Date/End Da	te.			
			,				
val	id Scientific Collecting P uirements. (List all curre	ermit issued by nt Alabama Scienti	ting Permits: If covered ADCNR, Wildlife and Fresl fic Collecting Permits issued to	hwater Fis	heries Div	ision and comply with ted sub-permitees.)	n all Collecting Permit
th		ral Permit(s). To	for the collection of <b>Migrat</b> co o obtain Federal Permits, co				
			g Permit does not relieve yo rmit may be revoked at any				
Si	Signature of Applicant:				e:		