

RETURN COMPLETED FORM TO:

Alaska Department of Fish and Game
 Wildlife Conservation Division
 1800 Glenn Highway, Suite 4
 Palmer, Alaska 99645-6736



Permit to Hunt from a Boat in GMUs 1-5, 6D

(APPLICATION ONLY)

The person described on this application is authorized to shoot from a boat to take big game in GMUs 1-5, and black bears in GMU 6D, under the terms of 5AA 92.085(9)&(12), subject to conditions stated, as long as the motor has been completely shut off and the progress from the motor's power has ceased.

Applicant Name (First) (Middle) (Last)					FOR DEPARTMENT USE ONLY			
Mailing Address								Permit Number
City			State		Zip Code		Date Issued	Issued By
Daytime Phone				Date of Birth		Applicant Physical Address		
Sex	Height	Weight	Color Eyes	Color Hair		City State Zip Code		

Complete either the Physician's Affidavit OR attach written proof that you receive at least 70 percent physical disability compensation from a government agency. Sign the Licensee Affidavit and return form to ADF&G. Please note that non-resident applicants are only eligible for a *temporary* permit.

PHYSICIAN'S AFFIDAVIT					LICENSEE AFFIDAVIT		
I certify under penalty of perjury that the applicant is at least 70 percent physically disabled. I am licensed to practice medicine in the State of Alaska.					I have personally reviewed the information on this application, and I certify under penalty of perjury that to the best of my knowledge and belief the information on this application is true and correct, and that I am entitled to hunt under the conditions of AS 16.05.940(26) provided I obtain the necessary licenses and permits before hunting. I also understand that information on this application is subject to public disclosure. (NOTE: Making a false statement or omitting a material fact is subject to a maximum penalty of \$5,000 or 1 year imprisonment, or both, per AS 11.56.210 and AS 16.05.420).		
Is the patient's physical disability permanent or temporary? <input type="checkbox"/> •Permanent - Permit <u>DOES NOT</u> expire, if an AK resident <input type="checkbox"/> •Temporary - Permit <u>EXPIRES</u> December 31 of current year							
Physician's Alaska License Number					I further understand; 1) as a Disabled Hunter permit holder I may only shoot from a boat when the motor is turned completely off and when progress from the motor has ceased, and 2) an able-bodied companion may help me retrieve game I have taken, <u>but that companion may not shoot from the boat.</u>		
Physician's Name (Print)							
Mailing Address					Hunter's Signature		
City, State, Zip Code							
Physician's Signature					Date		
Date							

AS 16.05.940(26) "person with physical disabilities" means a person who presents to the department either written proof that the person receives at least 70 percent disability compensation from a government agency for a physical disability or an affidavit signed by a physician licensed to practice medicine *in the state of Alaska* that the person is at least 70 percent physically disabled.

Questions about this application? Please call: ADF&G Permitting Division, Juneau 907-465-4148
 ADF&G ADA Coordinator: Statewide Telecommunication Device for the Deaf (TDD) 1- 800-478-3648 or (Juneau TDD) 907-465-3646