STATE OF ALASKA

DEPARTMENT						
Division of Co Bristol Bay Salmon Se			-	ion		
Name of Permit Holder:			-	Number:		
Fish Company:			CFEC ID:			
L. Connection of Discourse Free !			(located on	permit)		
In Season Contact-Phone or Email:						
Signature:						
Date:	Indicate (x) below the <u>Nushagak</u> district statistical area in which the set gill net permit is intended to be first used.					
	Combine	Queen	Clarks	Ekuk	Igushik	Coffee
	Note: Re-Registration is required before fishing in a different Nushagak district set net statistical area.					

fold here

fold here State of Alaska

Department of Fish & Game **Division of Commercial Fisheries** PO Box 230 Dillingham, AK 99576

PLACE STAMP HERE

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