FOR INTERNAL USE ONLY
Start Date:
End Date:

FORM 5

APPLICATION FOR AMATEUR PALAEONTOLOGIST PERMIT

(Heritage Conservation Act, S.N.B., 2010, c. H-4.05, s.24(3))

F	or Int	ernal Use Only			
Date Received			Permit No	File No	
1.	Ap	plicant information			
Suri	name		Given names		Initial(s)
Add	ress/Bo	ox No	Municipality or comm	nunity	Postal code
Tele	phone				E-mai
2.	1) 2) 3) 4)	County Site name if applicab Location (attach septe National Topog UTM (Universal	rate sheet, if necessary) raphic System (NTS) map sheet n I Transverse Mercator coordinate	umber(s) system) or latitude/longitude	
	5)6)	Name of land owners Address	(attach separate sheet, if necessa	Telephone ()tion and the boundaries of the study are	

		a) the significance of project (1 page maximum); and					
		b) a general description of project, including aims and objectives (1 page maximum).					
	2)) Do you wish to maintain a collection for education purposes? yes □ no □					
	3)	Anticipated commencement date of palaeontological field research					
	4)	Anticipated termination date of palaeontological field research					
	5)	Total number of days in field					
4.	Geology and palaeontology						
	1)	Period					
	2)	Formation					
	3)	Taxa					
_	C						
5.		Curation and documentation					
	1)	Anticipated date of completion of the project					
	2)	Anticipated date of deposition of recovered palaeontological objects and records					
Dat	ed thi	isday of, 20					
App	licant's	s Signature					

Please attach a description of the project making reference to the following:

3.

1)

Palaeontology proposal