



## APPLICATION DREDGING PERMIT

**Fee: \$15.00**

Please **PRINT** all information **except for your signature**. Incomplete or illegible applications will be returned.

<b>APPLICANT INFORMATION</b>		Client Number or SSN:	DATE OF BIRTH:
NAME [LAST]	[FIRST]	[MIDDLE]	
PHYSICAL ADDRESS:			
CITY:		STATE:	ZIP:
MAILING ADDRESS:			
CITY:		STATE:	ZIP:
HOME PHONE:	WORK PHONE:	E-MAIL ADDRESS:	
DRIVER'S LICENSE NUMBER		STATE:	DATE ISSUED:
EMPLOYER:			
EMPLOYMENT ADDRESS:			
CITY:		STATE:	ZIP:

1. Description of dredge(s) to be used (limit 3); maximum intake diameter – 4 inches:

MAKE	MODEL	INTAKE SIZE (inches)
1.		
2.		
3.		

2. Water name, location, and proposed dates of dredging (limit 10):

NAME OF WATER	MOUNTAIN RANGE OR VALLEY	COUNTY	DATES OF DREDGING
1.			
2.			
3.			

Continued on page 2

2. Water, location, and proposed dates of dredging (continued from page 1) :

NAME OF WATER	MOUNTAIN RANGE OR VALLEY	COUNTY	DATES OF DREDGING
4.			
5.			
6.			
7.			
8.			
9.			
10.			

I, the signator, in signing this application, hereby state that I am entitled to this permit under the laws of the State of Nevada and that no false information or false statement has been made by me to obtain this license.

Signature of Applicant \_\_\_\_\_

\_\_\_\_\_ Date

Mail or submit your application and the required fee to the appropriate Department office in the region where the dredge will be primarily operating:

Western Region

Fisheries Supervisor  
 Nevada Department of Wildlife  
 380 West "B" Street; Fallon, NV 89406  
 Telephone: (775) 423-3171  
 Counties: Carson City, Churchill, Douglas,  
 Humboldt, Lyon, Mineral, Pershing, Storey,  
 Washoe

Southern Region

Fisheries Supervisor  
 Nevada Department of Wildlife  
 4747 Vegas Dr.; Las Vegas, NV 89108  
 Telephone: (702) 486-5127  
 Counties: Clark, Esmeralda, Lincoln, Nye

Eastern Region

Fisheries Supervisor  
 Nevada Department of Wildlife  
 60 Youth Center Road; Elko, NV 89801  
 Telephone: (775) 777-2300  
 Counties: Elko, Eureka, Lander, White Pine

FOR DEPARTMENT USE ONLY

Date Received: \_\_\_\_\_

Date Approved: \_\_\_\_\_

Date Disapproved: \_\_\_\_\_

Department Representative: \_\_\_\_\_

REASON FOR DISAPPROVAL:

Date Returned for Additional Information: \_\_\_\_\_