

APPLICATION FOR SPECIFIC PERMIT
UNDER THE NORTH CAROLINA ARCHAEOLOGICAL RESOURCES PROTECTION ACT
(Pursuant to G.S. 70, Article 2)

Return form to:

Date of Application: _____

OSA ARPA Inbox
osa_arpa@dncr.nc.gov

OR

Office of State Archaeology
4619 Mail Service Center
Raleigh NC 27699-4619

| |
|---|
| <p>1. Principal Investigator</p> <p>Name: _____</p> <p>Agency Affiliation: _____</p> <p>Address (include zip code): _____</p> <p>Telephone Number: (____) _____ - _____ Email Address: _____</p> |
| <p>2. Project Director (if different from Principal Investigator)</p> <p>Name: _____</p> <p>Agency Affiliation: _____</p> <p>Address (include zip code): _____</p> <p>Telephone Number: (____) _____ - _____ Email Address: _____</p> |
| <p>3. Project Location Description</p> <p>Name of State Property: _____ County: _____</p> <p>Land Managing Agency: _____</p> <p>Name, address' (physical & email), and telephone # of agency official: _____</p> <p>_____</p> <p>Name, address' (physical & email), and telephone # of agency local contact: _____</p> <p>_____</p> <p>Estimated Acreage of Proposed Investigation Area: _____</p> |
| <p>4. Type of Proposed Investigations</p> <p>_____ Surface Survey with Artifact Collection</p> <p>_____ Surface Survey without Artifact Collection</p> <p>_____ Subsurface Testing: Type: _____</p> <p>_____ Unit Excavation</p> |
| <p>5. Proposed Schedule (Including beginning and completion dates. The schedule is to include 60 days to review and comment on the draft report and 30 days for response, revisions and submittal of the final report.)</p> <p>Fieldwork (Anticipated start date and duration): _____</p> <p>Total Project: _____</p> |
| <p>6. Approximate number of people to be involved with fieldwork: _____</p> |
| <p>7. Description of types and estimated amounts of ground disturbance and the kinds of equipment or machinery to be used during the fieldwork.</p> |

| |
|---|
| |
| 8. Description of any special access needs required to conduct the investigations (e.g., will roads be required which are not ordinarily open to the public?, will vehicles be required where there are currently no roads?): |
| 9. Description of the available laboratory facilities to be used for the analysis of the recovered materials: |
| 10. Description of the funds available for the investigations: |
| 11. Proposed curatorial facility (name, address): |
| 12. Written statement/criteria for evaluating requests for access to records and artifacts recovered during the investigations and maintained at the proposed curatorial facility. |
| 13. Name of person or position at the proposed curatorial facility who will determine access to records and artifacts recovered during the investigations: |
| 14. Facilities (if different from above) and plans for stabilization of perishable or unstable artifacts: |
| 15. If publication of the investigations results is anticipated, please indicate the name of the publication (if known) and the approximate date of issuance: |
| 16. Attachments: The following items should be attached to this application: <ul style="list-style-type: none"> • A 1:24,000 USGS Quadrangle map clearly indicating the location of the proposed investigations. • A written statement setting forth the exact nature, objectives, and scope of the proposed investigations, including the methods and techniques to be employed and the anticipated results. (e.g., project scopes of work; proposals, or contracts, as available). • A copy of the resume/vita of the Principal Investigator. • A copy of the resume/vita of the Field Director, if different from the Principal Investigator. |
| 17. Signature of Individual Submitting Application: _____ |