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| ***Email completed form to:*** [***asm\_crm@email.arizona.edu***](mailto:asm_crm@email.arizona.edu) | | | | ***Email subject line: AAA Blanket Permit Application*** | | |
| ***Please note: The original, signed permit application must be mailed within 30 days of permit issuance.***  ***Failure to do so will result in permit revocation. See Section 8g below for mailing instructions.*** | | | | | | |
| **ASM use only** | | | | | | |
|  | Permit No. |  |  | | Approved by: |  |
|  |  |  |  | | Date: |  |
|  | | | | | | |

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| **Section 1.** **Applicant Information** | | | | | | | |
|  | a. Date: | | |  | | | |
|  | b. Institution: | | |  | | | |
|  | b. Address: | | |  | | | |
|  | c. City, state, zip code: | | |  | | | |
|  | d. Phone: | | |  | | | |
|  | e. Permit contact name: | | |  | | | |
|  | f. Permit contact email: | | |  | | | |
|  |  | | | | | | |
| **Section 2. Staff** | | | | | | | |
|  | *a. List name(s) to appear on permit; check principal investigator [PI], project director [PD], or both.* | | | | | | |
|  | **PI** | **PD** | **Name** | | | | |
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| **Section 3. Type(s) of Investigation** | | | | | | | |
|  | archaeological non-collection survey | | | | |  | paleontological non-collection survey |
|  |  | | | | | | |
| **Section 4. Repository** | | | | | | | |
|  | All project records and any collected artifacts will be deposited at the Arizona State Museum. | | | | | | |
|  | *Check to acknowledge:* | | |  |  | | |
|  |  | | | | | | |
| **Section 5. Permit Duration** | | | | | | | |
|  | An Arizona Antiquities Act Blanket Permit is valid from the begin date of the effective year on the permit to December 31st of the effective calendar year. | | | | | | |
|  | *Check to acknowledge:* | | |  |  | | |
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| **Section 6. Rules Implementing the AAA** | | | |
|  | I have read and agree to follow the Rules Implementing the AAA. I understand that not doing so may result in a violation of the AAA. | | |
|  | *Check to acknowledge* |  |  |
|  | | | |

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| **Section 7. Publications** | | | | | | | | |
|  | Work conducted under this permit will be distributed in the following publications (e.g., technical report): | | | | | | | |
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| **Section 8. Signature** | | | | | | | | |
| **Upon approval and issuance of an Arizona Antiquities Act Project Blanket Permit, the applicant agrees to abide by the Arizona Antiquities Act, A.R.S. §41-841 et seq., and all implementing rules in Arizona Board of Regents Policies 8-201 through 8-207 as authorized by A.R.S. §15-1631.** | | | | | | | | |
| Signed: | |  | |  | Printed Name: |  | | |
| Position: | |  | |  | Date: |  | | |
|  | | | | | | | | |
| **Section 9. Please Note:** | | | | | | | | |
| a. It is not necessary to submit a quote request for an AAA Blanket Permit through the ASM Request Quote for Services website unless Project Registration is being requested at the same time.  b. Section 1: If the applicant is a first-time applicant, complete the Permit Application Addendum: First Time Applicant Form and submit with this application.  c. Section 1b: Institution refers to the company, agency, or institution conducting work.  d. Section 2: If the persons listed as a Project Director and/or Principal Investigator are not previously-approved by the Arizona State Museum Permits Office, request a Project Director/Principal Investigator Review service from the ASM Request for Quote Services website: <https://uavpr.arizona.edu/ASM/quoterequest/index.php>  e. Section 6: The Rules Implementing the AAA can be found here: <https://statemuseum.arizona.edu/crm/document/rules-implementing-15-1631-and-41-841>  f. Section 8: The permit application must be signed by a Principal Investigator listed on this permit who has been reviewed and approved according to the Rules Implementing the Arizona Antiquities Act.  g. A scan of the completed and signed permit application may be emailed to the below address with the specified subject heading; however, the original, signed application must be mailed within 30 days of permit issuance. Failure to do so will result in permit revocation.   1. Email completed form to: **asm\_crm@email.arizona.edu** 2. Use this subject heading when submitting the completed form via email: **AAA Blanket Permit Application** | | | | | | |
| h. Submit original, signed application to: | | | Archaeological Permits Office Arizona State Museum  The University of Arizona  1013 E. University Blvd.  Tucson, AZ 85721-0026 | | | | |