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| FOR INTERNAL USE ONLY Start Date: _____ End Date: _____ |
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FORM 4

APPLICATION FOR AMATEUR ARCHAEOLOGIST PERMIT
(Heritage Conservation Act, S.N.B., 2010, c. H-4.05, s.24(3))

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| For Internal Use Only | |
| Date Received _____ | Permit No. _____ |

1. Applicant information

| | | |
|----------------|---------------------------|-------------|
| Surname | Given names | Initial(s) |
| Address/Box No | Municipality or community | Postal code |
| Telephone | E-mail | |

2. Location of archaeological field research

- 1) Municipality or, if an unincorporated area, closest municipality _____
- 2) County _____
- 3) Location name(s) and/or Borden Number(s) *(if applicable)* _____
(attach separate sheet, if necessary)
 - National Topographic System (NTS) map sheet number(s) _____
 - UTM Universal Transverse Mercator coordinate system) _____
- parcel identifier (PID) _____
- 4) Name of land owners *(attach separate sheet, if necessary)* _____
 Address _____ Telephone () _____
- 5) Description of the boundaries of the study area
(attach 1:50,000 map sheet with study area shown)

3. Archaeology proposal

1) Please attach a description of the proposed field activities, making reference to the following:

- a) the archaeological field research activities you propose to undertake and your primary aims and objectives;
- b) the archaeological methods you plan to use; and
- c) a description of the collection and reporting techniques to be employed with respect to any archaeological

objects you discover.

2) Anticipated commencement date of archaeological field research _____

3) Anticipated termination date of archaeological field research _____

4) Total number of days in field _____

Dated this _____ day of, _____ 20 _____ .

Applicant's Signature

Send your application to: **Archaeological Services
Heritage Branch
Andal Building
P.O. Box 6000
Fredericton, NB
E3B 5H1**