



State of Alaska
 Department of Commerce, Community and Economic Development
 Division of Corporations, Business and Professional Licensing
BIG GAME COMMERCIAL SERVICES BOARD
 State Office Building, 333 Willoughby Avenue, 9th Floor
 PO Box 110806, Juneau, AK 99811-0806
 Phone: A – K (907) 465-2543 L – Z (907) 465-2691
 Fax: (907) 465-2974 ★ E-mail: license@alaska.gov
 Website: www.commerce.alaska.gov/occ/pgui.htm

For Division Use Only

**REGISTERED GUIDE-OUTFITTER APPLICATION
 FOR ADDITIONAL SPECIES**

Qualification for additional species:

1. Currently licensed as a Registered Guide-Outfitter.
2. Been involved in a minimum of three harvests on guided hunts for each of the species requested.

The following must be submitted:

1. Complete application.
2. **Fee:** There is no fee required for adding additional species to the Registered Guide-Outfitter license. However, a \$5.00 duplicate license fee is required for printing your existing license with the new species.
3. Documentation reflecting that the applicant has been involved in a minimum of three harvests on guided hunts for each of the species requested.

Documentation of three harvests on guided hunts can be demonstrated by submitting the following:

- An affidavit signed by the registered guide-outfitter certifying that the registered guide-outfitter has been involved in a minimum of three harvests on guided hunts for that species.
- A list of big game hunters that you have accompanied in the field on guided hunts, with identification of the year(s) and the contracting guide-outfitter(s). Hunt records on file with the Division will be used to determine your qualification of the requested species.

Applicant Name: _____

Guide-Outfitter License #: _____ Telephone #: _____

E-Mail Address (optional): _____

Please send correspondence via: Email US Mail

This application is a request to add the following species to my guide-outfitter license:

Mt. Goat Sheep Moose Caribou Brown Bear



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AFFIDAVIT OF BIG GAME HARVEST

Type or Print All Information Legibly in Ink

I attest, that I have been involved in a minimum of three harvests on guided hunts for the following big game animal(s).

Identification of Big Game Animal(s) Harvested: _____

Being first duly sworn upon his/her oath, deposes and says:

I _____, make the following voluntary statement and no threats, promises, or any form of duress have been used to induce me to make this statement.

By my signature below, I declare that all facts and statements contained in this application are true and correct; I am not omitting any information that might be of value to the Big Game Commercial Services Board in determining my qualifications, whether it is called for or not; and I agree that any falsification, omission, or withholding of information or facts concerning any qualifications as an applicant shall be sufficient to bar issuance of a license to me by the Big Game Commercial Services Board and such falsifications, omissions, or withholding shall serve as sufficient grounds for the suspension, cancellation, or revocation of my Guide license even though it is not discovered until after issuance.

I give permission to the Big Game Commercial Services Board to secure additional information concerning me or any statement in this application and supporting documents from any person or any source the Board may desire. I further agree to submit to questioning by the Board or any member thereof, and to substantiate any statements if desired by the Board.

All information supplied with this application is considered public unless required to be kept confidential by state or federal law.

WARNING: The Board may deny issuance, suspend, or revoke the license of a person who has obtained or attempted to obtain a license to provide big game commercial services by fraud or deceit. The person may also be subject to criminal charges for perjury (AS 11.56.200).

I certify that the statements contained in this application are true and correct.

SIGN HERE



Applicant Signature

Printed Name

Date: _____

Subscribed and Sworn to before me this _____ day of _____, 20_____.

SEAL



Notary Public

for the State of _____

My Commission Expires: _____