

STATE OF ALASKA DEPARTMENT OF NATURAL RESOURCES  
Division of Mining, Land and Water

LAND USE PERMIT APPLICATION

AS 38.05.850

Applicants must complete all sections of this application. In addition, applicants proposing:

- the use of the uplands must also complete the Supplemental Questionnaire for Use of State-Owned Uplands accompanying this application;
- off-road travel must also complete the Supplemental Questionnaire for Off-Road Travel accompanying this application; and/or
- the use of shorelands, tidelands, and submerged lands must also complete the Supplemental Questionnaire for Use of State-Owned Waters accompanying this application.

Other items that must accompany the completed application are:

- a (non-refundable) application fee; see current Director's Fee Order or contact your regional office for applicable fees;
- a topographic map or aerial photo showing the location of the proposed activity;
- additional items identified and required in any supplemental questionnaire(s) to this application; and
- additional pages if more space is necessary to answer the questions completely.

Completed Land Use Permit Applications should be submitted electronically or mailed to one of the following offices:

Northern Region Land Office  
3700 Airport Way  
Fairbanks, AK 99709-4699  
(907) 451-2740  
[nro.lands@alaska.gov](mailto:nro.lands@alaska.gov)

Southcentral Region Land Office  
550 West 7<sup>th</sup> Ave, Suite 900C  
Anchorage, AK 99501-3577  
(907) 269-8503  
[dnr.scro.permitting@alaska.gov](mailto:dnr.scro.permitting@alaska.gov)

Southeast Region Land Office  
P. O. Box 111020  
Juneau, AK 99811-1020  
(907) 465-3400  
[sero@alaska.gov](mailto:sero@alaska.gov)

Statewide TTY – 771 for Alaska Relay or 1-800-770-8973

LAS # 33949

(Applicant please provide if known)

**Applicant Information:**

Name: Randy John Martinez

Doing Business As: Northern Sky Expeditions

Mailing Address: PO Box 877596

Wasilla Ak 99687

Email Address: N.Sky.Expeditions@gmail.com

Date of Birth: [REDACTED]

Business License #: 2084101

EIN: [REDACTED]

Contact Person: John Martinez

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: 907 787 4026

Fax: \_\_\_\_\_

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If you are applying for a corporation, give the following information:

Name, address and place of incorporation:

Is the corporation qualified to do business in Alaska? Yes  No

If yes, provide name, address and phone number of the resident agent:

John Martinez 6995 S. Hanger talk cor Wasilla Ak 99623  
907 987 4026

Type of User (Select One):  Private non-commercial (personal use)  Commercial Recreation or Tourism  
 Public Non-profit including Federal, State, Municipal Government Agency  Other commercial or industrial

Duration of Project: The proposed activity will require the use of state land for: (Check one)

A single term of less than one year. Beginning month: \_\_\_\_\_ Ending month: \_\_\_\_\_  
 A multi year term for up to 5 years. Beginning year: 2026 Ending year: 2030

If multi year and seasonal, mark months of use in each year.

Jan,  Feb,  Mar,  Apr,  May,  Jun,  Jul,  Aug,  Sept,  Oct,  Nov,  Dec

Project Location:

Latitude/Longitude or UTM: 67.77381, -147.73782 or

Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ Meridian: \_\_\_\_\_

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Proposed project will require the use of up to \_\_\_\_\_ acres.

(Please add additional sheets for this section as necessary)

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**Project Description:** Describe in detail your intended use of state land. (State land also includes all tide and submerged lands beneath coastal waters and all shorelands beneath other navigable waterbodies of the state.) Discuss development and activities. (Attach additional pages as necessary.)

Small non permanent cabin on skids 12x16  
Small Wall tent platform built on skids 8x10  
One privy Pit

Should a portion of the permitted area be closed to the general public? Yes  No .

If yes, explain which portion and provide justification for exclusive use.

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**Site Description:** Briefly describe the current condition of the proposed site of use, noting any trash, garbage, debris or signs of possible site contamination. (If significant, we recommend you provide pictures to establish initial conditions.)

Site is small brush vegetation and grasses

Are there improvements or materials on the site now? Yes  No  If yes, briefly describe the improvements, their approximate value, and who owns them. (We recommend you provide pictures of improvements.)

Describe the natural vegetation – ground cover, trees, shrubs – and any proposed changes. Describe the location of any estuarine, riparian, or wetlands and any noticeable animal use of area. Embankment is covered with small alders & willows. dead debris from surrounding trees

**Site Access:** Describe how you plan to access the site, and your mode of transportation.

Will access site by airplane on gravel bar

If your access is by aircraft, specify the type and size of aircraft:

pa 18 super cub

To access the site, the aircraft is equipped with floats  wheels  skis .

**Number of people:**

- 1. Indicate the number of employees and supervisors who will be working on the site. 7
- 2. Indicate the number of customers who will be using the site per year or season. 12
- 3. Indicate the number of days the site will be used per year or season. 70

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**Environmental Risk / Hazardous Substances:** In the course of your proposed activity will you generate, use, store, transport, dispose of, or otherwise come in contact with toxic and/or hazardous materials, and/or hydrocarbons?

Yes  No  . If yes, please describe: Will be storing Av gas in 6 gallon fuel cans with cans on spill containment vessel

20 lbs propane fuel tank

The types and volumes of fuel or other hazardous substances present or proposed:

Av gas up to 60 gallons  
propane tanks up to 2-20lbs tanks

The specific storage location(s):

fuel will be stored more than 100 feet from rivers edge  
propane will be stored in cabin

The spill plan and prevention methods:

Cans will be stored on two 6'x6'x4" raised berm  
Containment vessel

If you plan to use either above or below ground storage containers (like tanks, drums, or other containers) for hazardous material storage, answer the following questions for each container:

Where will the container be located?

What will be stored in the container?

What will be the container's size in gallons? \_\_\_\_\_

Give a description of any secondary containment structure, including volume in gallons, the type of lining material, and configuration: 60 Gallon berm 6'x6'x4" with 90 gallons of capacity 100% PVC fuel will be divided into two and there will be two

Containment Systems

Will the container be tested for leaks? Yes  No

Will the container be equipped with leak detection devices? Yes  No . If no, describe:

60 gallon fuel cans

Do you have any reason to suspect, or do you know if the site may have been previously contaminated?

Yes  No . If yes, please explain:



Signature of Applicant or Authorized Representative

Owner

Title

6-30-26

Date

This form must be filled out completely and submitted with the applicable fees. Failure to do so will result in a delay in processing your permit. AS 38.05.035(a) authorizes the director to decide what information is needed to process an application for the sale or use of state land and resources. This information is made a part of the state public land records and becomes public information under AS 40.25.110 and 40.25.120 (unless the information qualifies for confidentiality under AS 38.05.035(a)(8) and confidentiality is requested, AS 43.05.230, or AS 45.48). Public information is open to inspection by you or any member of the public. A person who is the subject of the information may challenge its accuracy or completeness under AS 44.99.310, by giving a written description of the challenged information, the changes needed to correct it, and a name and address where the person can be reached. False statements made in an application for a benefit are punishable under AS 11.56.210.

In submitting this form, the applicant certifies that he or she has not changed the original text of the form or any attached documents provided by the Division. In submitting this form, the applicant agrees with the Department to use "electronic" means to conduct "transactions" (as those terms are used in the Uniform Electronic Transactions Act, AS 09.80.010 – AS 09.80.195) that relate to this form and that the Department need not retain the original paper form of this record: the department may retain this record as an electronic record and destroy the original.

For Department Use Only  
Application received date stamp  
  
Receipt Type:  7A  RR  FF

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