##

## ANTIQUITIES PERMIT APPLICATION FORM

## ARCHEOLOGY

### GENERAL INFORMATION

## I. PROPERTY TYPE AND LOCATION

Project Name (and/or Site Trinomial)

County (ies)

USGS Quadrangle Name and Number

UTM Coordinates Zone E N

Location

Federal Involvement ❑ Yes ❑ No

Name of Federal Agency

Agency Representative

**II. OWNER (OR CONTROLLING AGENCY)**

Owner

Representative

Address

City/State/Zip

Telephone (include area code) Email Address

**III. PROJECT SPONSOR (IF DIFFERENT FROM OWNER)**

Sponsor

Representative

Address

City/State/Zip

Telephone (include area code) Email Address

### PROJECT INFORMATION

**I. PRINCIPAL INVESTIGATOR (ARCHEOLOGIST)**

Name

Affiliation

Address

City/State/Zip

Telephone (include area code) Email Address

(OVER)

**ANTIQUITIES PERMIT APPLICATION FORM (CONTINUED)**

## II. PROJECT DESCRIPTION

Proposed Starting Date of Fieldwork

Requested Permit Duration Years Months (1 year minimum)

Scope of Work (Provided an Outline of Proposed Work)

## III. CURATION & REPORT

Temporary Curatorial or Laboratory Facility

Permanent Curatorial Facility

## IV. LAND OWNER’S CERTIFICATION

I, , as legal representative of the Land Owner,

 , do certify that I have reviewed the plans and research design, and that no investigations will be performed prior to the issuance of a permit by the Texas Historical Commission. Furthermore, I understand that the Owner, Sponsor, and Principal Investigator are responsible for completing the terms of the permit.

Signature Date

## V. SPONSOR’S CERTIFICATION

I, , as legal representative of the Sponsor, , do certify that I have review the plans and research design, and that no investigations will be performed prior to the issuance of a permit by the Texas Historical Commission. Furthermore, I understand that the Sponsor, Owner, and Principal Investigator are responsible for completing the terms of this permit.

Signature Date

## VI. INVESTIGATOR’S CERTIFICATION

I, , as Principal Investigator employed by (Investigative Firm), do certify that I will execute this project according to the submitted plans and research design, and will not conduct any work prior to the issuance of a permit by the Texas Historical Commission. Furthermore, I understand that the Principal Investigator (and the Investigative Firm), as well as the Owner and Sponsor, are responsible for completing the terms of this permit.

Signature Date

Principal Investigator must attach a research design, a copy of the USGS quadrangle showing project boundaries, and any additional pertinent information. Curriculum vita must be on file with the Archeology Division.

**FOR OFFICIAL USE ONLY**

Reviewer Date Permit Issues

Permit Number Permit Expiration Date

Type of Permit Date Received for Data Entry

 

**Texas Historical Commission**

**Archeology Division**

P.O. Box 12276, Austin, TX 78711-2276

Phone 512-463-6096

thc.texas.gov

5/17/16