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United States Department of the Interior Bureau of Land Management Utah State Office

Request for Modification of Permit for Archaeological Investigations

Name of Permittee:	2. Mailing Address:
Telephone Number:	FAX Number:
nail Address:	
Date of Permit Issuance:	
. Nature of Modification Requested:	
Addition of Personnel Removal of Personnel Change of Curation Facility	Change of Name or Address Change/Add Location
. Provide pertinent information about modification y position and permit area requested (with vitae a	requested: i.e. extension date, names of individuals
	n your permit by role and permit area): Authorized for Crew Chief:
7. Existing Permit Status (list personnel currently of Authorized for Principal Investigator:	
Authorized for Principal Investigator:	
Authorized for Principal Investigator:	Authorized for Crew Chief:
8. Signature – Permit Administrator:	Authorized for Crew Chief:
Authorized for Principal Investigator: Signature – Permit Administrator: For BLM Internal Use Only Modification Approved	Date: Special Stipulations AttachedLetter of Explanation Attached