



Fish and Wildlife Application

Tracking Number: 100454132

Applicant Information

If approved, will the authorization be issued to an Individual or Company/Organization/Government? Individual
Are you the Individual this application will be issued to? Yes

APPLICANT CONTACT INFORMATION

Applicant is an Individual or an Organization to whom this authorization Permit/Licence will be issued, if approved.

Name: Allan Irvine
Phone: 250-777-1518
Daytime Phone:
Fax:
Email: al@newgraphenvironment.com
Date of Birth:
Mailing Address: 6 Regent St
Nelson British Columbia V1L 2P1
Canada

TECHNICAL INFORMATION

APPLICATIONS

You may submit one or more application(s) Click on the 'Add Application' for each application you would like to add. In order to submit multiple applications together they must be for one applicant and in the same region.

Type

Scientific Fish Collection Permit

SCIENTIFIC FISH COLLECTION PERMIT – ELIGIBILITY

Do all applicants and co-applicants meet the eligibility criteria for the appropriate category as listed below?

Question	Answer	Warning
Are all applicants 19 years or older?	Yes	
Application Type:	New application	

SCIENTIFIC FISH COLLECTION PERMIT

Please provide us with the following information about the Scientific Fish Sampling:

SCIENTIFIC FISH COLLECTION ACTIVITY

Please provide us with the following information about the Research Activity

What is the activity for the Scientific Fish Collection? Research
Applicant Date of Birth (DD/MM/YYYY) Mar 8, 1975

SAMPLING PROGRAM

Please provide us with the following information about the Sampling Program

Will collection activities involve live transport? No
Will collection activities involve any tagging, marking, or lethal sampling? Yes

Will collection activities involve any variances to the listed Permit Conditions?	No
Will collection activities involve any Species at Risk?	No

SAMPLE PERIOD

Please provide us with the following information about the Sampling Period.

Start Date:	Sep 4, 2024
End Date:	Dec 31, 2024
Please select the intended activity:	Research

SAMPLE LOCATION(S)

Please provide us with the following information about the Sampling Location. Water shed codes can be found here.
Please provide UTM coordinates or attach Shape files or KMZ files with marked sampling locations on Step 3 – Document Upload.

Ministry of Environment Region	Waterbody	Watershed Code	UMT Zone	Northing	Easting
Skeena	tributaries to Bulkley River	460-000000-0000			
		0-00000-0000-000			
		0-000-000-000			
Skeena	tributaries to Zymoetz River	440-000000-0000			
		0-00000-0000-000			
		0-000-000-000-			
Skeena	tributaries to Morice River	460-000000-0000			
		0-00000-0000-000			
		0-000-000-000			
Skeena	tributaries to Skeena River	400-000000-0000			
		0-00000-0000-000			
		0-000-000-000			
Skeena	tributaries to Kispiox River	400-384999-0000			
		0-00000-0000-000			
		0-000-000-000			

SAMPLING OBJECTIVES

Please describe fish collection component of the project and / or project area - must include:

- Rationale
- Brief description of project/activities:
- Risks associated with project/activities:
- Mitigation measures clearly describing how those risks are avoided or reduced (do not reference other documents)
- Methodologies
- Was there a review of previous baseline information available on the Fisheries Information Summary System (FISS)?
- Are any variances requested? Please include justification and dates if required.
- Any other biological details, information or reasoning to support your rationale.

NOTE: Providing insufficient detail may result in significant delays in processing or even rejection of your application. You are required to obtain separate permits for additional activities not listed.

Please see attached memo

SAMPLING TECHNIQUES

Please indicate all the sampling techniques, check all that apply.

Sampling Technique	Code
Dip Netting	DN
Electrofishing	EF
Minnow Trapping	MT

SPECIES TO BE SAMPLED

Please provide us with the following information about the Species to be sampled, use species codes listed on Appendix B Table 2.

Please do not apply for Federal Salmon Species. For more information on Federal Salmon Species please refer to the Fisheries and Oceans Canada Scientific licenses webpage.

No permits will be issued for SARA listed species or for salmon other than Kokanee. SARA permit application forms webpage. Scientific Fish Collection Appendix A

Is this sampling program targeting specific species? No

SPECIES INFORMATION

Please identify all target species/potential species encountered. A complete species list can be found here

Common Name	Scientific Name	Code
Rainbow Trout	Oncorhynchus mykiss	RB
Dolly Varden	Salvelinus malma	DV
Cutthroat Trout	Oncorhynchus clarkii	CT

LETHAL SAMPLING, TAGGING, AND MARKING PROGRAM DESCRIPTION

Earlier in the application you indicated that tagging, marking, or lethal sampling will be taking place, therefore please provide the following information.

Is this sampling program targeting specific species? No

SPECIES INFORMATION

Please identify all target species/potential species encountered

Target Species	# of Fish	Sample Waterbody/Code
Rainbow Trout	600	400

SCIENTIFIC FISH COLLECTION PERMIT - APPENDIX

Please refer to the following Appendix pertaining to your Fish Collection Permit and its Conditions here.

Name of College of Applied Biology qualified registrant on project: Allan Irvine

ADDITIONAL PERSONS

Authorized persons qualified to conduct salvage work under this permit (see item 13, Appendix A)

- Lucy Schick
- Mateo Winterscheidt
- Tieasha Pierre
- Vern Joseph
- Alicia Fernando
- Taylor Wale
- Jesse Olson
- Colin Morrison
- Cody Haggard
- Ciara Sharpe
- Colin Morrison

ATTACHED DOCUMENTS

Document Type	Description	Filename
Generic Document Upload	Application details	application_moe_dfo.pdf
Generic Document Upload	spatial file of site locations and details	sites_skeena_2024_20240809.kml

PRIVACY DECLARATION

PRIVACY NOTE FOR THE COLLECTION, USE AND DISCLOSURE OF PERSONAL INFORMATION
Personal information is collected by FrontCounter BC under the legal authority of section 26 (c) and 27 (1)(a)(i) of the Freedom of Information and Protection of Privacy Act (the Act).

The collection, use, and disclosure of personal information is subject to the provisions of the Act. The personal information collected by FrontCounter BC will be used to process your enquiry or application(s). It may also be shared when strictly necessary with partner agencies that are also subject to the provisions of the Act. The personal information supplied in the application package may be used for referrals or notifications as required. Personal information may be used by FrontCounter BC for survey purposes. For more information regarding the collection, use, and/or disclosure of your personal information by FrontCounter BC, please contact FrontCounter BC at 1-877-855-3222 or at:

FrontCounter BC Program Director
FrontCounter BC, Provincial Operation
441 Columbia Street
Kamloops, BC V2C 2T3

☒ Check here to indicate that you have read and agree to the privacy declaration stated above.

IMPORTANT NOTICES

Please review the clauses and conditions associated with your application below.

DECLARATION

☒ I acknowledge that the information I have provided is true and that I fulfill the requirements for the applications.

APPLICATION AND ASSOCIATED FEES

Application and Associated Fees: \$25.00 CAD plus applicable taxes

OFFICE

Office to submit application to:

APPLICANT SIGNATURE

Applicant Signature	Date
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OFFICE USE ONLY		
Office	File Number	Project Number
	Disposition ID	Client Number