GEORGIA
DEPARTMENT OF NATURAL RESOURCES
COASTAL RESOURCES DIVISION
ONE CONSERVATION WAY • BRUNSWICK, GA 31520 • 912.264.7218
COASTALGADNR.ORG

MARK WILLIAMS
COMMISSIONER

DOUG HAYMANS
DIRECTOR

Research Requirements and Application

October 2021

Purpose:
To evaluate and provide appropriate authorization and/or permission for research and monitoring projects conducted in the state's jurisdictional areas for the public's interest.

Research Proposal Procedure:
A written proposal is required for all research projects within the State's jurisdiction. This proposal should include the following:

- Applicant and contact information
  - Principal Investigator (PI), student researcher/technician (if applicable)
- Academic sponsor
- Objectives of the project
- Methods including sampling design
- Brief synopsis
- Map, including lat/long of project. If exact coordinates are unknown, provide general area coordinates.
- Funding sources (including agency and grant)
- Time frame of the project
- Structural components, including coordinates, that will be placed in jurisdiction (i.e. what equipment will be left in the field during the project, and what will the dimensions of those structures be?)
- Number and frequency of people accessing the site
- Likely impacts of the project to the site
- Listing of all local, state, and/or federal authorizations received or being sought, if applicable
- Written permission from the property owner of the project site (i.e. upland or adjacent to the project site) if applicable.
- Qualifications of the PI and/or student researcher/technician. This should be a resume or CV with summary or similar work.
- A copy of the scientific collecting permit research is being conducted under, if applicable.
  - A scientific collecting permit (SCP) is required for any person to take, possess, or transport any of the wildlife of this state, or the plumage, skin, or body thereof, or the nests or eggs of the same for scientific purposes (O.C.G.A § 27-2-12).
  - Please visit the website below to apply for a SCP or if you have any questions concerning one.
    - https://gadnrle.org/special-permits
- Is this request related to the Golden Ray St. Simons Sound Incident? ☐Yes ☐No

For staff to properly review your proposal, all the above information should be provided in your submittal. Please note, additional information may be required depending on project type and/or location. Any changes to the scope of the proposal (including project goals, objectives, or placement of structures), after an authorization has been issued, will need to be re-evaluated by CRD.
Please submit all above information along with the attached Application and Revocable License to Meghan Angelina at meghan.angelina@dnr.ga.gov.

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Research Application Form

Application Title: Mosquito collection on Sapelo Island for CDC

Principal Investigator: Dr. Dan Peach

Student Researcher/Technician (if applicable): Vivian Poley (with assistance from Sam Schiappa)

Academic Sponsor: University of Florida

Mailing Address: _____

E-mail Address: vcp15054@uga.edu **Phone Number:** 404-747-8780

Project Location(s): Chatham County, Waycross County, Jones Center at Ichauway, Sapelo Island

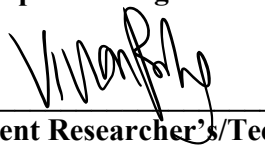
GPS Coordinates: _____

Expected Start Date: June 1st **Expected End Date:** July 30th

Upon completion of research, Applicants are subject to the following Post Research Requirements:

- Provide DNR a copy of all data collected, with the understanding that DNR will not publish the data without the consent of the researcher, upon request
- Provide DNR a digital copy of any research poster produced by the student, upon request
- Provide DNR a written report of the results, upon request
- Provide DNR a copy of any published materials
- DNR CRD should be properly acknowledged in any publications
- Removal of all project related materials at the end of the project
- DNR CRD must be notified upon project completion

Principle Investigator's Signature — 6/12/2026 **Date**



Student Researcher's/Technician's Signature — 6/12/2026 **Date**

STATE OF GEORGIA

REQUEST FOR A REVOCABLE LICENSE FOR THE USE OF TIDAL WATERBOTTOMS

APPLICANT NAME(S): Vivian Poley

MAILING ADDRESS: 392 S Pope St | Apt 1 | Athens | GA | 30605
(Street) | **(City)** | **(State)** | **(Zip)**

PROJECT ADDRESS/LOCATION: Sapelo Island

COUNTY: McIntosh **WATERWAY:** Duplin River

LOT, BLOCK & SUBDIVISION NAME FROM DEED:

Georgia Department of Natural Resources
Coastal Resources Division
One Conservation Way
Brunswick, Georgia 31520-8687

I am requesting that I be granted a revocable license from the State of Georgia to encroach on the beds of tidewaters, which are state owned property. Attached hereto and made a part of this request is a copy of the plans and description of the project that will be the subject of such a license. I certify that all information submitted is true and correct to the best of my knowledge and understand that willful misrepresentation or falsification is punishable by law.

I understand that if permission from the State is granted, it will be a revocable license and will not constitute a license coupled with an interest. I acknowledge that this revocable license does not resolve any actual or potential disputes regarding the ownership of, or rights in, or over the property upon which the subject project is proposed, and shall not be construed as recognizing or denying any such rights or interests. I acknowledge that such a license would relate only to the property interests of the State and would not obviate the necessity of obtaining any other State license, permit, or authorization required by State law. I recognize that I waive my right of expectation of privacy and I do not have the permission of the State of Georgia to proceed with such project until the Commissioner of DNR or his/her designee has executed a revocable license in accordance with this request.

Sincerely,

By: _____ Date: 6/12/2026
Signature of Applicant

_____
Title, if applicable

By: _____ Date: 6/12/2026
Signature of Applicant

_____
Title, if applicable

Attachments