



Request for Destructive Analysis Approval of Held-In-Trust Artifacts or Fossil Specimen

As stated in the Office of Archaeology and Historic Preservation’s State Rules and Procedures, 8CCR 1504-7 (9)(B.3) proposed analysis of artifacts or fossils which would cause their destruction or damage may be performed only with the written consent of History Colorado through the State Archaeologist. Requests are granted with consideration as to whether such artifacts/specimen are unique or duplicated in other state-owned collections. Please note that under State rules and procedure (8 CCR 1504-7, Sec. 9(C) 2), ancillary samples (e.g. charcoal, wood, soil, coprolites, and small floral or small faunal specimens from archaeology sites) do not require special permission from the Office of the State Archaeologist, provided approval has been obtained by the State-Approved repository. For all other State artifacts and fossils, please fill out this form and attach any additional information necessary. The Office of the State Archaeologist will supply notification of consent to the affected museum/repository and research representative contact within thirty days.

Name of the museum/repository curating the artifact(s)/specimen _____

Name of the museum/repository’s representative contact (please include title, phone and e-mail address): _____

Name of the researcher requesting the proposed analysis (include State Permit number if applicable). [Academic and non-permitted independent researchers must attach a research proposal, proof of higher education enrollment (for students), supporting letter(s) from at least one sponsoring academic instructor (for students), approval from the State-Approved repository, and curriculum vitae with examples of completed/published works (for non-permitted independent researchers).] Please include the researcher’s full contact information (e.g. affiliation, mailing address, phone number and e-mail):

Proposed analysis of the artifact(s) or fossil specimen (describe with official Smithsonian site number(s), site name(s), artifact/specimen catalog no(s).(attach list if necessary)):

Briefly describe the proposed research aim/goal(s) (and how will the results be disseminated?):

Name and address of the analysis research institution, firm or consultant (include contact name, mailing address and e-mail):



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Describe the number and condition of remaining similarly curated artifacts/specimen in State-approved repositories:

Will any remaining artifacts/specimens be returned to the curating museum/repository?

If Yes, will the Museum/Repository issue a loan agreement with the place of analysis? _____

Please forward this form and attachments to the State Curation Coordinator.

Thank You

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