



# APPLICATION SPECIAL FISHING PERMIT

Fee: \$ 25

Please **PRINT** all information **except for your signature**.

<b>APPLICANT INFORMATION</b>		INSTITUTION/ORGANIZATION NAME:	TAX IDENTIFICATION NUMBER:
NAME OF AUTHORIZED APPLICANT: [LAST]		[FIRST]	[MIDDLE]
PHYSICAL ADDRESS:			
CITY:		STATE:	ZIP:
MAILING ADDRESS:			
CITY:		STATE:	ZIP:
PHONE:		E-MAIL ADDRESS:	

## CONDITIONS

- a) Special Fishing Permits are for use only by members, patients, or children of approved institutions or organizations.
- b) During the time a member, patient, or child is fishing, the Special Fishing Permit must be in the possession of the officer or employee who is supervising the member.
- c) For a member, patient, or child to fish in a legal manner, he must be in the company of an officer or employee of the institution or organization provided such person has a valid Nevada fishing license. All persons using permits are subject to all existing fishing regulations.
- d) It is unlawful for any person other than a member, patient, or child of one of such approved organizations or institutions to use the permit issued by the Department.
- e) Each permit authorizes no more than fifteen (15) members, patients, or children to fish.
- f) No more than two (2) permits per year will be issued to each institution or organization.

**NUMBER OF PERMIT(S) REQUESTED (limit 2):** \_\_\_\_\_ **X \$25 =** \_\_\_\_\_

I, the signator, in signing this application, hereby state that I am entitled to this permit under the laws of the State of Nevada and that no false information or false statement has been made by me to obtain this permit.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

### FOR DEPARTMENT USE ONLY

Date Received: \_\_\_\_\_

Date Approved: \_\_\_\_\_

Date Disapproved: \_\_\_\_\_

Date Returned for Additional Information: \_\_\_\_\_

Department Representative: \_\_\_\_\_

REASON FOR DISAPPROVAL:

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## **Instructions for Nevada Special Fishing Permit**

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**Reference: Nevada Revised Statutes 502.077**

### **Permit Requirement**

The Department shall issue special fishing permits to each public and private non-profit:

- (a) Mental health facility or hospital that provides mental health services;
- (b) Facility for the detention or correctional care of juveniles;
- (c) Rehabilitation center within a hospital;
- (d) Facility or establishment that provides care for older persons;
- (e) Facility which provides temporary foster care for children who are not delinquent; and
- (f) Club or other social group operated for the benefits of disadvantaged or at-risk children.

### **New Applicants**

New applicants must submit a letter or brochure describing the services provided by their institution or organization. If the organization/institution is not a public institution, proof of the organization's non-profit status is also required and should be included with the application.

### **Where to Send Application and Payment**

The completed application and required fee and letter(s) should be submitted to the Nevada Department of Wildlife, License Office, 4600 Kietzke Lane, D-135, Reno, NV 89502.

### **Denial of Application**

Whenever an application is denied, the Department shall notify the applicant in writing of the reason for the denial.