



APPLICATION SPECIAL FISHING PERMIT

Fee: \$ 25

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

APPLICANT INFORMATION		INSTITUTION/ORGANIZATION NAME:	TAX IDENTIFICATION NUMBER:
NAME OF AUTHORIZED APPLICANT: [LAST]		[FIRST]	[MIDDLE]
PHYSICAL ADDRESS:			
CITY:		STATE:	ZIP:
MAILING ADDRESS:			
CITY:		STATE:	ZIP:
DATE OF BIRTH:		SPORTSMAN ID:	
PHONE:		E-MAIL ADDRESS:	

CONDITIONS

- Special Fishing Permits are for use only by members, patients, or children of approved institutions or organizations.
- 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.
- 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.
- 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.
- Each permit authorizes no more than fifteen (15) members, patients, or children to fish.
- 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: _____

REASON FOR DISAPPROVAL: _____

Date Returned for Additional Information: _____

Department Representative: _____

Instructions for Nevada Special Fishing Permit

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.