



**APPLICATION**  
**Special Purpose Permit**  
**\$200 Permit Fee\***  
**LCB File No. R148-12**

Purpose: [check one]

- Clearance survey
- Relocation out of harms way

\*Do not send fee until notified of approval from NDOW

A Special Purpose Permit is for the purposes of handling desert tortoises (*Gopherus agassizii*) or Gila monsters (*Heloderma suspectum*) as a result of land development or maintenance activities. Wildlife will be handled only to be moved out of harms way (but remain within the vicinity of the project area) or will be removed from the project area and deposited at the appropriate facility or agency, as stipulated on the permit.

Please fill in or print all information. Incomplete or illegible applications will be returned.

**PROCESSING TIME:** Applications may need to be routed for review and approval, which can take up to 4 weeks, depending on complexity and Division recommendations.

I hereby make application for: [Mark the appropriate box and then read and follow the instructions.]

- New application: Complete the entire applicant information block and all sections.
- Renewal of last year's PERMITTED projects with changes or new projects: Complete the applicant information block; update all other sections in the application where changes are being requested. **CLEARLY DESCRIBE CHANGES.**
- Renewal of last year's PERMITTED projects without changes: Complete the applicant information block.

**APPLICANT INFORMATION**

Date of Birth:  Tax ID or SSN:  Today's Date:

Name [Last]:  [First]:  [Middle]:

Physical Address:

City:  State:  Zip:

Mailing Address:

City:  State:  Zip:

Home Phone:  Work Phone:  Email Address:

Height:  Weight:  Hair:  Eyes:  Gender:

Driver License #:  State:  Date Issued:

Occupation:  Employer:

Work Address:

Institution or Company you are representing, if not yourself or the employer listed above (Name/Address/Phone):

1. Below, list the species and number of each that you intend to handle by each specific capture situation (C.S.) or method. Do not combine several capture situations with a single number; e.g. "200 -- a, b, c, d." Provide a specific number with each C.S./method.

- Capture Situations/Methods:
- A. Salvage specimens found dead & deposit at appropriate agency or facility
  - B. Detain and call appropriate agency or pick up service for transfer to appropriate facility (as designated in permit).
  - C. Relocate less than 1500 feet out of harms way to adjacent suitable habitat (e.g. moving off project boundary)
  - D. Relocate less than 100 feet out of harms way to adjacent suitable habitat (e.g. moving off road)
  - E. Other (specify): \_\_\_\_\_

Common Name:	<input type="text"/>	Scientific Name:	<input type="text"/>	#/Site/Year	<input type="text"/>	C.S.	<input type="text"/>
Common Name:	<input type="text"/>	Scientific Name:	<input type="text"/>	#/Site/Year	<input type="text"/>	C.S.	<input type="text"/>
Common Name:	<input type="text"/>	Scientific Name:	<input type="text"/>	#/Site/Year	<input type="text"/>	C.S.	<input type="text"/>
Common Name:	<input type="text"/>	Scientific Name:	<input type="text"/>	#/Site/Year	<input type="text"/>	C.S.	<input type="text"/>
Common Name:	<input type="text"/>	Scientific Name:	<input type="text"/>	#/Site/Year	<input type="text"/>	C.S.	<input type="text"/>
Common Name:	<input type="text"/>	Scientific Name:	<input type="text"/>	#/Site/Year	<input type="text"/>	C.S.	<input type="text"/>

2. Give locations and dates of land development or maintenance activity. Provide UTM coordinates (NAD 83 zone 11) for the location (provide a map or GIS shapefile if necessary). Identify any specific landmarks (body of water, mountain range, stream, drainage, etc...) nearby and provide the county and the dates of the land development or maintenance activity.

3. If requesting to handle desert tortoises, please list all USFWS-approved tortoise biologist(s) and/or monitor(s) on page 4 of this permit. Please include letters for those USFWS-approved tortoise biologist(s) and/or tortoise monitor(s) and provide a copy of the Biological Opinion issued by the USFWS for the above project(s). In the space provided below, please reference the USFWS files.

4. If necessary, attach a synopsis, not exceeding 5 pages, of the land development or maintenance activity (note below if attached).

5. Disposition: If not relocating out of harms way, name and address of the agency or facility to which all salvaged dead or live specimens will be transferred\* (see below). The NDOW Southern Region Office should be contacted immediately for all live or dead Gila monsters observed.

\*NDOW requests the proponent and associated monitors salvage whole body specimens, or tissue samples if whole specimens cannot be salvaged, from all reptiles that have been found dead in or nearby the areas of proposed land development or maintenance activity. The purpose is purely scientific in affording an opportunity for the collection of geo-referenced voucher specimens and genetic material, which will provide a better understanding on local and regional relationships about wildlife population diversity and ecology. Given this project will have mortalities, which are commonly disregarded, discarded, or buried in adjacent to project areas, we request that specimen information be collected (i.e., date, time, UTM's) and retained with all vouchers. Whole body specimens should be frozen or genetic tissue vouchers should be preserved in 95% EtOH and transferred to NDOW as soon as possible. This is a request at this time and is not a regulatory requirement of the project. Please contact Jason Jones ([jjones@ndow.org](mailto:jjones@ndow.org)) for additional information on whole specimen and tissue voucher protocols.

I, the signator, in signing this application, hereby state that I am entitled to this permit under the laws of the State of Nevada, per NRS 503.597, and that no false information or false statement has been made by me to obtain this authorization. (Please insert electronic signature or type in your name to substitute your signature if submitting electronically OR print, sign and fax or mail.)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

and mail to: OR Email\* form to: OR Fax to:  
Julie Meadows jmeadows@ndow.org 775-688-1509  
Nevada Department of Wildlife Attn: Julie Meadows  
License Office  
6980 Sierra Center Pkwy Ste-120  
Reno, Nevada 89511  
(775) 688-1512

\*Please consider reducing paper waste by emailing this form

For Department use only

Date Received:  Date Reviewed:  Reviewed By:

Approved

Modify

Disapproved

If Disapproved, Reason:

Reviewer's Notes:

