



APPLICATION
COMMERCIAL COLLECTION OF UNPROTECTED WILDLIFE
Fees: \$500 Unprotected Fish (carp, Sacramento blackfish, crayfish etc.) **(22.01)**

- Please **PRINT** all information **except for your signature**. Incomplete or illegible applications will be returned.
- SLAP Entity ID (Special Permit and License ID) - New applicants SLAP ID will be assigned when the permit is issued.
- Federal Tax ID or SSN only required for new applicants.

PURPOSE: (check one) Sacramento Blackfish, Carp etc. Crayfish (Lake Tahoe only)

INSTITUTION OR BUSINESS ENTITY INFORMATION- (Institution or business entity the permit is for.)

INSTITUTION OR BUSINESS ENTITY NAME: (If same as responsible party indicate SAME)			SLAP Entity ID
MAILING ADDRESS:			FEDERAL TAX ID:
CITY:	STATE:	ZIP:	E-MAIL ADDRESS:
PHYSICAL ADDRESS:			
CITY:	STATE:	ZIP:	TELEPHONE:

RESPONSIBLE PARTY– Person responsible for permit

NAME [LAST]	[FIRST]	[MIDDLE]	SLAP Entity ID
MAILING ADDRESS:			SSN
CITY:	STATE:	ZIP:	E-MAIL ADDRESS:
PHYSICAL ADDRESS:			
CITY:	STATE:	ZIP:	TELEPHONE:
HEIGHT:	WEIGHT:	HAIR:	EYES:
DRIVER'S LICENSE NUMBER			STATE:
			DATE ISSUED:

- List all additional collectors/employees if this application is for a business entity or institution. _____

- Specific location within the state, by county or region, where the wildlife is to be collected: _____

- Proposed BEGINNING and END dates for field collecting activities: _____
- Purpose for commercially collecting the species listed in this application (end use) _____

- Specific methods and equipment to be used in collecting the wildlife listed in this application _____

6. List the specific name of each species (common and scientific name) and the approximate number of each species you request to collect. Attach additional sheets if necessary.

Species Name (common and scientific)	Number	Species Name (common and scientific)	Number

7. The address of the location at which the wildlife will be held in the possession of the applicant: _____

8. YES NO I have been convicted of violating a state or federal wildlife law or regulation, relating to the commercialization of wildlife, in the 5 years preceding the date on which I sign this application. If YES, complete the following. Use additional sheets if necessary.

State	Date Convicted	Description of Violation	Penalty

9. If you wish to have your phone and fax number listed in the permittee directory, please include them here:

Phone: _____ Fax: _____

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 license.

 Signature of Applicant _____
Date

UNPROTECTED FISH: Submit the completed application to the appropriate regional office located in Elko, Fallon, or Las Vegas.

Eastern Region - Counties: Elko, Eureka, Lander, White Pine
 Nevada Department of Wildlife
 60 Youth Center Road; Elko, NV 89801
 Telephone: (775) 777-2300

Western Region - Counties: Carson City, Churchill, Douglas, Humboldt, Lyon, Mineral, Pershing, Storey, Washoe
 Nevada Department of Wildlife
 1100 Valley Rd, Reno, NV 89512
 Telephone: (775) 688-1500

Southern Region - Counties: Clark, Esmeralda, Lincoln, Nye
 Nevada Department of Wildlife
 3373 Pepper Ln.; Las Vegas, NV 89120
 Telephone: (702) 486-5127

FOR DEPARTMENT USE ONLY

Date Received: _____ Date Returned for Additional Information: _____
 Date Disapproved: _____ Department Representative: _____

REASON FOR DISAPPROVAL: