

APPLICATION LICENSE – NONCOMMERCIAL POSSESSION OF LIVE WILDLIFE Fee: \$15 (22.73)

I hereby make application for:

(Mark the appropriate box and then read and follow the instructions.) New application: Complete the entire applicant information block, all sections, sign, date, and submit with the \$15 fee.

Renewal: Complete the entire applicant information block, Sections 3, 5, and 6, including changes and additions where appropriate; sign, date, and submit with the \$15 fee.

- Please **PRINT** all information **except for your signature**. Incomplete or illegible applications will be returned. PROCESSING TIME: Allow thirty (30) days.
- 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.

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

| INSTITUTION OR BUSINESS ENT | SLAP Entity ID | | | | | | |
|-----------------------------|---------------------------------|-----------|------------------|--|-----------------|-----------------|--|
| MAILING ADDRESS: | | | | | | FEDERAL TAX ID: | |
| CITY: | | STATE: | ZIP: | | E-MAIL ADDRESS: | | |
| PHYSICAL ADDRESS: | | | | | | | |
| CITY: | | STATE: | ZIP: TE | | TELEPHONE: | | |
| RESPONSIBLE PARTY- | Person resp | onsible f | or permit | | | | |
| NAME [LAST] | | [FIRST] | [FIRST] [MIDDLE] | | LE] | SLAP Entity ID | |
| MAILING ADDRESS: | | | | | SSN | | |
| CITY: | | STATE: | ZIP: E-MAIL A | | E-MAIL ADDRES | IRESS: | |
| PHYSICAL ADDRESS: | | | | | | | |
| CITY: | | STATE: | ZIP: | | TELEPHONE: | | |
| HEIGHT: | WEIGHT: | | HAIR: EYES: | | | GENDER: | |
| DRIVER'S LICENSE NUMBER | | | STATE: | | DATE ISSUED: | | |

A noncommercial license does not authorize the sale, barter, or trade of wildlife. Wildlife possessed under the authority of a noncommercial license **may not** be maintained for public display nor as part of or adjunct to any commercial establishment. A license will not be issued for a prohibited species except to a current licensee who is renewing and has been continually licensed to possess that animal since February 28, 1994.

1. Attach a complete description, including a diagram, of the holding facilities, cages, or aguaria that will be used to confine the wildlife. NOTE: Ignore this if you are renewing last year's license and there were no facility changes.

2. If you are required by the U.S. Department of Agriculture and/or U.S. Fish and Wildlife Service to possess licenses or permits for species listed on this application, please attach copies of those permits to the application.

3. I request authorization to add or obtain the following species and numbers of each. NOTE: Mountain lions, bobcats, ungulates, and black bear are required to be tattooed or otherwise permanently marked. Be sure to list the tattoo or ID number. If you fail to include the scientific name, the application will be returned.

| COMMON NAME | SCIENTIFIC NAME | NUMBER | ID NUMBER/TATTOO |
|-------------|-----------------|--------|------------------|
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4. Name, address, and telephone number of the source where you intend to obtain the wildlife listed in Section 1.

5. I presently possess the following species and number of each. NOTE: Mountain lions, bobcats, ungulates, and black bear are required to be tattooed or otherwise permanently marked. Be sure to list the tattoo or ID number. If you fail to include the scientific name, the application will be returned.

| COMMON NAME | SCIENTIFIC NAME | NUMBER | ID NUMBER/TATTOO |
|-------------|-----------------|--------|------------------|
| | | | |
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6. YES NO In the past 5 years, have you been convicted of violating a provision of Nevada's wildlife laws or regulations, or those of any other state or the U.S. Fish and Wildlife Service which pertain to the possession of wildlife? If YES, but you did report this on a prior application, skip to the signature line. If YES, but you did not previously report this, list all convictions below. Use additional paper if necessary.

Date convicted: _____ Where convicted: _____

Convicted of:

I, the signator, in signing this application, hereby state that I am entitled to this license 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

Submit your completed application and the \$15 fee to the appropriate office below:

Western Region

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

Southern Region

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

Eastern Region

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

| FOR DEPARTMENT USE ONLY | | | | |
|----------------------------|---|--|--|--|
| Department Representative: | Date Received: | | | |
| Date Approved: | Date Returned for Additional Information: | | | |
| Date Disapproved: | Letter Sent: | | | |
| REASON FOR DISAPPROVAL: | | | | |