



WILDLIFE

IMPORTATION INVESTIGATION

Do not complete this form for the following wildlife: Chukar; Quail-Gambel's, California, Scaled, Bobwhite & Mountain; Ring-neck Pheasant; Hungarian Partridge; Turkey; Raptors; Mountain Lion; Bobcat; Black Bear; authorized aquatic bait & live baitfish (refer to NAC 503.500-.535); game fish (as defined in NAC 503.060); other non-prohibited species which are native/indigenous to Nevada; and EXEMPT species (listed in NAC 503.140)

An importation permit is still required for all wildlife except those specifically exempted by NAC 503.140 and those species covered under aquatic bait regulations (NAC 503.500-535) DO NOT submit an importation permit application until this investigation is approved or denied. Sources of information may be found in your local library, bookstores, veterinarians, wildlife agencies in other states.

Please **PRINT** all information **except for your signature**. Incomplete or illegible applications will be returned.

APPLICANT INFORMATION- Client Number or SSN: _____ DATE OF BIRTH: _____

NAME(LAST): _____ (FIRST): _____ (MIDDLE): _____

PHYSICAL ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ WORK PHONE: _____ E-MAIL ADDRESS: _____

BUSINESS NAME(if applicable to wildlife): _____

Specific location(physical address or township, range, section, 1/4 section) where wildlife will be held and maintained: _____

WILDLIFE SPECIES PROPOSED TO IMPORT:

NUMBER	COMMON NAME	SCIENTIFIC NAME(GENUS AND SPECIES	ID / TATOO
_____ /	_____ /	_____ /	_____ /
_____ /	_____ /	_____ /	_____ /
_____ /	_____ /	_____ /	_____ /
_____ /	_____ /	_____ /	_____ /

(Use additional sheets if necessary.)

WILDLIFE IMPORTATION INVESTIGATION

FOR ALL SPECIES:

- Commercial Possession of Live Wildlife s _____
- Dog Training or Field Trials s _____
- Noncommercial Possession of Live Wildlife s _____
- Falconry s _____
- Shooting Preserve s _____
- Noncommercial Possession of Live Wildlife s _____
- Pet Trade (Business License Number:) _____
- Exhibition s _____
- Other: _____

WHERE WILDLIFE SPECIES IS COMING FROM:

ORIGINAL NATIVE RANGE (country, state, province) OF THIS SPECIES: _____

SCIENTIFIC REFERENCE/LITERATURE CITED: _____

PRESENT GEOGRAPHIC RANGE (country, state, province) OF THIS SPECIES: _____

SCIENTIFIC REFERENCE/LITERATURE CITED: _____

FOR TERRESTRIAL (land) SPECIES ONLY:

TEMPERATURE EXTREMES (Fahrenheit) IN THE SPECIES NATIVE RANGE: HIGH: _____ LOW: _____

SCIENTIFIC REFERENCE/LITERATURE CITED: _____

AVERAGE ANNUAL PRECIPITATION IN THE NATIVE RANGE:

INCHES: _____ SCIENTIFIC REFERENCE/LITERATURE

CITED: _____ AVERAGE NUMBER OF FROST-FREE

(> 32 F) DAYS IN THE SPECIES NATIVE RANGE:

DAYS PER ANNUM: _____ SCIENTIFIC REFERENCE/LITERATURE CITED: _____

DURING WHICH SEASON DOES MAJORITY OF PRECIPITATION OCCUR (spring, summer, fall, winter): _____

FOR AQUATIC (water) SPECIES ONLY:

TEMPERATURE EXTREMES IN WHICH THIS SPECIES IS KNOWN TO SURVIVE (Fahrenheit): HIGH: _____
LOW: _____

SCIENTIFIC REFERENCE/LITERATURE CITED: _____

IDEAL RANGE OF WATER TEMPERATURES FOR REPRODUCTIVE ACTIVITY OF THIS SPECIES:

HIGH: _____ LOW: _____

SCIENTIFIC REFERENCE/LITERATURE CITED: _____

WILDLIFE IMPORTATION INVESTIGATION

FOR ALL SPECIES

SPECIFIC DISEASES THIS SPECIES KNOWN TO CARRY: _____

SCIENTIFIC REFERENCE/LITERATURE CITED: _____

VACCINES OR TREATMENTS AVAILABLE TO PREVENT OR CURE THESE DISEASES: _____

SCIENTIFIC REFERENCE/LITERATURE CITED: _____

INTERNAL PARASITES THIS SPECIES IS KNOWN TO HARBOR: _____

SCIENTIFIC REFERENCE/LITERATURE CITED: _____

EXTERNAL PARASITES THIS SPECIES IS KNOWN TO HARBOR: _____

SCIENTIFIC REFERENCE/LITERATURE CITED: _____

SPECIFIC TREATMENTS AVAILABLE TO ERADICATE THESE PARASITES: _____ IN

THE WILD, THIS SPECIES IS: (Mark one) CARNIVOROUS: (meat eater) _____

HERBIVOROUS: (vegetation eater) _____ OMNIVOROUS: (meat & vegetation) _____

PLANTS AND/OR ANIMALS THIS SPECIES EATS: _____

HAS SPECIES SUCCESSFULLY ESTABLISHED A POPULATION OUTSIDE ITS NATIVE RANGE? _____

YES () NO (). IF YES, WHERE? (List specific country, state or water): _____ IF

YES, DID THIS SPECIES OUT-COMPETE OR DISPLACE ANY NATIVE WILDLIFE SPECIES: _____ YES

() NO (). IF YES, WHAT SPECIFIC SPECIES? _____ LIST

ALL THE NATURAL PREDATORS OF THIS SPECIES: _____

IF THIS SPECIES ESCAPES FROM CONFINEMENT, WHAT METHODS/MEASURES WILL YOU USE TO RECAPTURE IT? _____

ADDITIONAL QUESTIONS FOR APPLICANT: _____

REVIEWER(S) COMMENTS: _____

FOR DEPARTMENT USE ONLY

Date Received: _____

Date Returned for Additional Information: _____

Date Approved: _____

Date Disapproved: _____

Signature of Department Representative

REASON FOR DISAPPROVAL: