



FEDERAL FISH AND WILDLIFE LICENSE/PERMIT APPLICATION FORM

RETURN TO:
Migratory Bird and Eagle Permit Office
(Address and Telephone No.)

Type of Activity:
Taxidermy

A. COMPLETE IF APPLYING AS AN INDIVIDUAL			
1. Name:			
2. Street address:			3. County:
4. City, State, Zip Code:			
5. Date of Birth:	6. Social Security no.:	7. Occupation:	
8. List any business, agency, organizational, or institutional affiliation associated with the wildlife to be covered by this license or permit:			
9. Home telephone number:	10. Work telephone number:	11. Fax Number:	12. E:mail address:

B. COMPLETE IF APPLYING AS A BUSINESS, CORPORATION, PUBLIC AGENCY OR INSTITUTION			
1. Name of business, agency or institution:			2. Tax identification no.:
3. Street address:			4. County:
5. City, State, Zip Code:			
6. Describe the type of business, agency, or institution:			
7. Name and title of person responsible for permit (president, principal officer, director, etc.):			
8. Home telephone number:	9. Work telephone number:	10. Fax number:	11. E:mail address:

C. ALL APPLICANTS COMPLETE	
1. Do you currently have or have you had any Federal Fish and Wildlife License Permit? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, list license or permit numbers:	
2. Have you obtained any required state or foreign government approval to conduct the activity you propose? Yes <input type="checkbox"/> No <input type="checkbox"/> Not required <input type="checkbox"/> If yes, provide a copy of the license or permit.	
3. Enclose check or money order payable to the U.S. FISH AND WILDLIFE SERVICE in the amount of \$25 Institutions which qualify under 50 CFR 13.11(d)(3) may be exempt from fees.	
4. ATTACHMENTS: Complete the additional pages of this application. Application will not be considered complete without these pages. Incomplete applications may be returned.	
5. CERTIFICATION: I hereby certify that I have read and am familiar with the regulations contained in Title 50, Part 13, of the Code of Federal Regulations and the other applicable parts in subchapter B of Chapter I of Title 50, and I further certify that the information submitted in this application for a license or permit is complete and accurate to the best of my knowledge and belief. I understand that any false statement herein may subject me to the criminal penalties of 18 U.S.C. 1001.	
6. Signature (in ink) of applicant or person responsible for permit in Block A or B	7. Date:

Information Sheet

Taxidermy 50 CFR 21.24

In order to expedite the processing of your application for a Taxidermy Permit, make sure you include the following with your completed Fish and Wildlife License/Permit Application, Form 3-200-8.

Indicate all of the addresses where taxidermy services will be provided with street address or legal description. This must include all drop-off and pick-up locations. All locations will be held responsible for record keeping and tagging requirements in accordance with Title 50, Code of Federal Regulations, Parts 13, 20, and 21 are subject to both State and Federal inspections.

2. List all of your taxidermy experience including mounting your own lawfully acquired migratory game birds or other wildlife and/or training or schools you have attended.
3. Give the names and addresses of anyone who will be assisting you. They must possess a Federal permit or be listed as a subpermittee under your permit, in addition to appropriate State authorization. Applicants and subpermittees must be at least 18 years of age.
4. Include copies of all applicable State licenses that authorize this activity.
5. List telephone number, including area code, where you can be reached between 8:00 a.m. and 5:00 p.m.

There is a \$25 processing fee payable to the U.S. Fish and Wildlife Service in check or money order for this permit. Institutions which qualify under 50 CFR 13.11(d)(3) may be exempt from fee.

The public reporting burden for these reporting requirements is estimated to be 1 hour, including time for reviewing instructions, gathering and maintaining data, and completing and reviewing the forms. Comments regarding the burden estimate or any other aspect of the reporting requirement(s) should be directed to the Service Information Collection Clearance Officer, MS 224 ARLSQ, Fish and Wildlife Service, Washington, D.C. 20240, or the Office of Management and Budget, Attention: Desk Officer for the Department of the Interior; Washington, D.C. 20503.

An agency may not conduct and a person is not required to respond to a collection of information unless a currently valid OMB control number is displayed.