

VIRGINIA DEPARTMENT OF GAME AND INLAND FISHERIES
PASSAGE PEREGRINE FALCON PERMIT APPLICATION
Under State Authority of §29.1-412, §29.1-419, Code of Virginia, 4 VAC 15-250

**Completed Applications must be mailed to the attention of: Ms. Shirl Dressler, VDGIF,
P.O. Box 11104, Richmond, VA 23230-1104; and must be received no later than 16 Sept., 2011**

VDGIF or State Permit No: _____ USFWS Permit No(s): _____

Applicant's Full Name: _____
(First) (Middle) (Last)

Sex: M F (Circle One)

Address: _____
_____ County: _____

Home Phone Number: (____) _____ Work Phone Number: (____) _____

Mobile Phone Number: (____) _____ E-mail address: _____

Address where peregrine falcon will be sheltered: _____

How many years have you practiced falconry? _____

With what species have you practiced falconry? _____

Do you have experience trapping raptors? If yes, what species have you captured and what methods were used? _____

Where do you plan to attempt to capture a passage peregrine falcon? _____

Class of Permit: General ____ Master ____

PLEASE FILL-OUT BACK OF APPLICATION ALSO

Please provide the following information for each falconry raptor currently in your possession:

<i>Species</i>	<i>Band Number</i>	<i>Band Type and Color</i>
1. _____	- _____	- _____
2. _____	- _____	- _____
3. _____	- _____	- _____

<i>Age</i>	<i>Sex</i>	<i>Date of Acquisition</i>	<i>Source of Bird</i>
1. _____	- _____	- _____	- _____
2. _____	- _____	- _____	- _____
3. _____	- _____	- _____	- _____

Please indicate in order of preference the four time periods you would like to attempt taking a passage Peregrine Falcon. Time periods include: 1) Sept. 20 – 26, 2) Sept. 27 – Oct. 3, 3) Oct 4 – Oct 10, 4) Oct. 11 – 17.

1. _____
2. _____
3. _____
4. _____

CERTIFICATION

I hereby certify that I have read and am familiar with applicable State and Federal regulations, and I further certify that the information submitted in this application for a passage peregrine falcon 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 outlined in State and Federal law.

Applicant's Signature: _____ Date: _____

FEDERAL NOTICE

In accordance with the Privacy Act of 1974 (PL 93-579), please be advised that:

1. The gathering of information on fish and wildlife is authorized by :
 - (a) Bald Eagle Protection Act (16 U.S.C. 663a)
 - (b) Endangered Species Act of 1973 (16 U.S.C. 1539)
 - (c) Migratory Bird Treaty Act (16 U.S.C. 703-711)
 - (d) Lacey Act (18 U.S.C. 42 and 44)
 - (e) Tariff Classification Act of 1962 (19 U.S.C. 1202) and
 - (f) Title 50, Part 13, of the Code of Federal Regulations

2. The disclosure of the requested information is required in order to process federal applications for licenses or permits authorized under the above acts. With the exception of your social security number, failure to disclose all of the information may be sufficient cause for the U.S. Fish and Wildlife Service to deny you a permit.
3. In the event there is indicated a violation of a statute, regulation, rule, order, or license, whether civil, criminal, or regulatory in nature, the requested information may be transferred to the appropriate Federal, State, local, or foreign agency charged with investigating or prosecuting such violations.
4. In the event of litigation involving the records or the subject matter of the records, the requested information may be transferred to the U.S. Department of Justice.

