

APPLICATIONCaptivity License for Wildlife Rehabilitation

This application is for individuals applying for a captivity license for rehabilitation that has held an Apprentice license for 12 months in North Carolina or a similar license in another state; wants to change species or has relocated to North Carolina. Please complete all applicable sections of this application and return to the address listed below. Incomplete applications will be returned.

1/20

Part I: Applicant Information					
Applicant's Name:			Date of Birth (required):		
(Last)	(First)	(M. Initial)		,	
Resident Address:			(6) -1 -1	(7' - C - d -)	
(Street	:)	(City)	(State)	(Zip Code)	
Mailing Address: (if different from resident address) (PO Box or S	Street)	(City)	(State)	(Zip Code)	
Facility Location:			_		
(if different from resident address) (Street	t)	(City)	(State)	(Zip Code)	
Telephone #: ()	Email:		County:		
Organization Affiliation (if applicable)					
<u> </u>					
NC Wildlife Rehabilitation License # Please attach a copy of your Out-of-State rehabilitation license if relocating to North Carolina.					
Check box if you would like to have your contact information published on the NCWRC website as a license. List telephone number to be published on the NCWRC website if different from the above telephone number: ()					
Part II: Species Category					
Categories of animals and birds that you would like to rehabilitate (Check all that apply):					
☐ Small Mammals ☐ White-tail Deer Fawns ☐ Waterfowl* ☐ Songbirds* ☐ Raptors*					
☐ Rabies Species (Must have held a basic wildlife rehabilitation license for at least 3 years in North Carolina or a similar license in another state.)					
* A valid Federal Migratory Bird Permit for rehabilitation must be obtained from the U.S. Fish & Wildlife Service before a state Wildlife Rehabilitation License may be issued. Please attach a copy of your Federal Migratory Bird Permit.					
White-tailed Deer Fawn:					
Request to be (check one): Primary Fawn Rehabilitator (10 x 20 x 6 feet) Secondary Fawn Rehabilitator (10 x 10 x 6 feet)					
□ Seconda	ry Fawn Kenabilitat	or (10 x 10 x 6 feet)			
Facility must be completed before submitting application. Is your facility complete and ready for inspection?					
Part V: Rabies Species Applicant Information:					
Training Course	Date	Credit Hours	Instru	ctor	

Evidence of Veterinarian Cooperation:				
The Veterinarian below has agreed to provide necessity	essary medical treatment relating	g to the rehabilitation of rabi	ies species.	
		()		
Name of Veterinarian (please print)		Veterinarian Telephone #		
			'	
Veterinarian Office Address	City		Zip Code	
Veterinarian Signature				
Acknowledgments:				
Acknowledgments.				
☐ I hereby certify that contact information for	or the above veterinarian has bee	n nosted at my facility where	the rahies species are	
being rehabilitated.	Title above vetermanan nas see.	in posted at my radinty where	tile rables species are	
being renabilitated.				
☐ I have notified the animal control authority	v and local health denartment to	inform them that I will be re	hahilitating rahies	
species within the county. Contact information for			=	
rehabilitated.	both agencies has been posted a	at my facility where the fable	35 species are being	
renabilitateu.				
☐ I hereby certify that my rabies immunizatio	on is up to date.			
Part VI: Applicant Signature				
I hereby certify that all information contained herein is true an	id accurate to the best of my knowledge.	I have read and understand the rule	es and statutes pertaining to	
the possession of wildlife in North Carolina, under 15A NCAC 1		=	=	
that if I am issued a Captivity License for Rehabilitation, I will be	· · · · · · · · · · · · · · · · · · ·			
additional state licenses may be required. I understand I am on understand that the Commission may suspend or revoke my licenses.				
listed on my license.	zense and comiscate an whome in my pos	session should i violate any or these	a regulations of the conditions	
instead of they incense.				
Applicant's Signature		Date	<u>—</u>	

Make check or money order for \$12.00 payable to NCWRC. Price includes \$2.00 transaction fee as mandated by G.S. 113-270.1B. A service charge of up to \$25 will be charged on returned checks (GS 25-3-506). Mail completed application with fee to:

NC Wildlife Resources Commission License Section 1707 Mail Service Center Raleigh, NC 27699-1700