



APPLICATION

Wildlife Transportation Permit

Import Export In-State Transportation

Applicant's Name _____ Telephone # ()

 (Last) (First) (M. Initial)

Physical Address _____

 (Street) (City) (State) (Zip Code)

Organization Affiliation _____

 (County) (Email)

Mailing Address (if different from above) _____

 (Street) (City) (State) (Zip Code)

Date of Birth _____ Driver's License #, State _____

Import/Export/Transportation Activities:

Purpose: Educational Falconry Commercial use/sale Other: _____
 Import/Export/Transportation Dates _____

Species	Quantity	Import Location	Export Location

**** Attach additional pages as needed ****

Source Information: (For Importation/transportation only)

Name of Organization _____ Telephone # ()

 Physical Address _____

 (Street) (City) (State) (Zip Code)

County _____ State License/Permit # _____

License/Permit Verification (List all license/permit numbers allowing legal possession of imported/exported species in North Carolina)

I hereby certify that all information contained herein is accurate and truthful to the best of my knowledge. I have read and understand the rules and statutes pertaining to the importation/exportation of wildlife in North Carolina, under 15A NCAC 10B.0101, 10H .0301-0302, 10H .0801-.0813 and G.S. § 113-274, and agree to abide by these regulations. I understand that if I am issued a Wildlife Importation/Exportation Permit I will be responsible for the humane and ethical treatment of all wildlife obtained under that permit and that additional state licenses may be required for captivity. I also understand that the Commission may revoke my permit at any time and confiscate all wildlife in my possession should I violate any of these regulations or the conditions listed on my permit

Send completed application to:
 NC Wildlife Resources Commission
 License Section
 1707 Mail Service Center
 Raleigh, NC 27699-1707

Applicant Signature

WRC USE ONLY Approved Denied

Permit Supervisor _____

1(888) 248-6834 www.ncwildlife.org