

Evidence of Veterinarian Cooperation:

The Veterinarian below has agreed to provide necessary medical treatment relating to the rehabilitation of rabies species.

Name of Veterinarian (please print) (_____) _____
Veterinarian Telephone #

Veterinarian Office Address _____ City _____ Zip Code _____

Veterinarian's Signature _____ Date _____

Acknowledgments:

- I hereby certify that contact information for the above veterinarian has been posted at my facility where the rabies species are being rehabilitated.
- I have notified the animal control authority and local health department to inform them that I will be rehabilitating rabies species within the county. Contact information for both agencies has been posted at my facility where the rabies species are being rehabilitated.
- I hereby certify that my rabies immunization is up to date.

Part VI: Applicant Signature

I hereby certify that all information contained herein is true and accurate to the best of my knowledge. I have read and understand the rules and statutes pertaining to the possession of wildlife in North Carolina, under 15A NCAC 10H .1401 - .1406 and G.S. § 113-272.5 and 113-275 and agree to abide by these regulations. I understand that if I am issued a Captivity License for Rehabilitation, I will be responsible for the humane and ethical treatment of all wildlife obtained under that license and that additional state licenses may be required. I understand I am only authorized to possess the category of wild animals and wild birds that are stated on my license. I also understand that the Commission may suspend or revoke my license and confiscate all wildlife in my possession should I violate any of these regulations or the conditions listed on my license.

It is the duty of the applicant to ensure that they are in compliance with all applicable local, state, and federal laws prior to submitting this application.

Applicant's Signature _____ Date _____

*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