

APPLICATION

Reptile and Amphibian Possession Permit

Possession Only

(This permit applies to native reptiles and amphibians only)

Applicant's Name					Telephone #:	())	
	(Last)	(First	:) (1	M. Initial)	-			
Resident Address:								
		(Street)			(City)	(S	state)	(Zip Code)
Mail Address: (if different from above)		(0, .)			(0))			
(in different from above)		(Street)			(City)	(S	state)	(Zip Code)
Facility Location:		(Street)			(City)	(6	state)	(Zip Code)
		(Street)			(City)	(3	state)	(zip code)
County:	Date of Birth:		Email:					
Institution								
Represented								
(if applicable):								
Species Informatio	n:							
Species		Quantity		Species	Species		Quantity	
**Attach additional pages						<u> </u>		
I hereby certify that all inf pertaining to the possessi			-	• •	-			
understand that the Com								-
<i>the conditions listed on m</i> It is the duty of the applic		aro in complian	co with all applicable lo	cal state and	t fodoral laws prio	r to cubr	mitting this	application
it is the duty of the applic		are in complian						
					end completed application with a check or money der for \$10 made payable to NCWRC to:			
					N.C. Wildlife Resources Commission License Section			
Application Signature Date					1707 Mail Service Center			
					Raleigh, NC 2769			
				1(888) 24	48-6834	WW	w. ncwildl	ite.org

Note: Transactions are not considered final until the check has cleared the bank. Items purchased with a returned check will be made invalid. A service charge of up to \$25 will be charged on returned checks (G.S. 25-3-506).