



APPLICATION

Reptile and Amphibian Possession Permit Rehabilitation Only

(This permit applies to native reptiles and amphibians only)

Applicant's Name _____	Telephone #: () _____
(Last) (First) (M. Initial)	
Resident Address: _____	(City) (State) (Zip Code)
(Street)	
Mail Address: _____	(City) (State) (Zip Code)
(Street)	
Facility Location: _____	(City) (State) (Zip Code)
(Street)	
County: _____	Date of Birth: _____
	Email: _____
Institution Represented (if applicable): _____	

Permit Type:

This reptile and amphibian possession permits will be issued for rehabilitation only. Please indicate intended activity (Check all that apply)

Reptile Rehabilitation **Amphibian Rehabilitation**

Check box if would like to have your contact information published on the NCWRC website as a reptile and/or amphibian rehabilitator.
List the telephone number to be published on the NCWRC website if different from the above telephone number: (_____) _____

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 possession of wildlife in North Carolina under 15A NCAC 10H.1302, G.S. 113-274, and Article 55 and agree to abide by these regulations. I 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.

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.

	<p>Send completed application with a check or money order for \$10 made payable to NCWRC to:</p> <p>N.C. Wildlife Resources Commission License Section 1707 Mail Service Center Raleigh, NC 27699-1700</p> <p>1(888) 248-6834 www. ncwildlife.org</p>
Application Signature _____	Date _____

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).