



APPLICATION

Fox – Coyote Transport Permit

Applicant's Name				Telephone #	
(Last)	(First)	(M. Initial)	()		
Physical Address					
(Street)	(City)	(State)	(Zip Code)		
Mailing Address <small>(if different from above)</small>					
(Street)	(City)	(State)	(Zip Code)		
(County)			(Email)		
Date of Birth		Driver's License #, State			
Trapping Id #					
<i>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 transportation of wildlife in North Carolina, under 15A NCAC 10B .0409 and G.S. § 113-272.6, and agree to abide by these regulations. I understand that if I am issued a Transportation 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.</i>				Send completed application to: NC Wildlife Resources Commission Regulated Activities Permits Section 1707 Mail Service Center Raleigh, NC 27699-1707 (919) 707-0061 www.ncwildlife.org	
<i>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.</i>					
Applicant Signature		Date			