

U.S. FISH & WILDLIFE SERVICE - MIGRATORY BIRD PERMIT OFFICE

(See attached addresses)

REHABILITATION ANNUAL REPORT - REPORT YEAR ______Report Due: _____

PERMITTEE:		PER	MIT NUMBER:									
ADDRESS:	РНО	PHONE NUMBER:										
City State Zip Code E-Mail:												
Check here if reporting a change of name, address, or contact information INSTRUCTIONS: Please type or print the information requested below for all migratory birds (see 50 CFR 10.13) held under your permit												
INSTRUCTIONS: Please type or print during the report year, and return the comp mandatory, but the same information must birds in your report. Filing an annual report You must submit a report even if you had a CFR parts 13 & 21) DISPOSITION CODES: R=Released; To	leted report to the ab- be submitted. A supp t is a condition of you no activity during the	ove address by <u>J</u> olemental sheet is ur permit. Failur year. <u>Make sur</u>	anuary 31 of the s available if need re to file a timely re you sign the ce	followin led. <i>Do n</i> report co	g year. U ot includ ould resul	Jse of the Le specie t in sus	nis forn es other pensior	n is not r than migratory n of your permit.				
A. <u>BIRDS HELD OVER</u> . Please list <u>individu</u> DISPOSITION, check appropriate column. Alse	ual birds that were held	over from the <u>last</u>		nued care	, and prov	ide the f	ollowin	g information. For				
DISPOSITION, check appropriate column. Also	Date	an transfers.		Г	Disposition	ı (check	one)	Date of				
Common Name	Acquired	Nature o	of Injury		R T E			Disposition				
B. NEW ACQUISITIONS. Please provide	de a summary of all b	irds acquired du	ring the report yea	ar, <u>categ</u>	orized by	specie	s. The	quantity in the				
Received column should equal the sum of sections D and E for Pending and Transf												
	Total Number				nter quan							
Common Name	Received	Released	Transferred	Peno	ding	Euthanized		Died				
CERTIFICATION: I certify that the ab				knowle	edge. I u	ndersta	and tha	nt any false				
statement herein may subject me to the o	criminal penalties of	18 U.S.C. 1001	•									
Signature:				Date:								

REHABILITATION PERMIT ANNUAL REPORT - YEAR PERMIT NO. (Pg. 2) C. REPORTED INJURIES. Please complete for any individual birds received that were shot, poisoned (confirmed), electrocuted,												
trapped, or otherwise injured or killed	ed as the res	sult of a pote	entially crimin	nal activity	y. (Such	n injuries	should h				u,	
immediately.) DISPOSITION CODES: R=Released; T=Transferred; P=Pending; E=Euthanized; D=Died. Date Cause/Nature Disposition (check one) Source												
Common Name	Acquired			T	P	eck one)	D			<u>urce</u> y & State	e)	
		+										
		-										
D. STILL PENDING. Please complete to	or any <u>indivi</u>	dual birds still	held as of 12/3	1 of the repo	ort year. I	lease iden	L itify any bi	rds you	maintain	as foster p	parents	
with a circled "F" next to their common name. Common Name Date Acquired Nature of Injury Proposed Disposition (check one)												
Common Name	Dat	e Acquired		Nature	oi injur	<u>y</u>		•	R	T	E	
E. <u>TRANSFERS</u> . Please complete provide the permit number if applicab = Continued Care; Live-E/S = Live-	le; if not app	olicable, prov	vide address.	For Purpo	ose of Tr	ansfer, u	se the fol	lowing	codes:			
	Education of	. Scientific F		sferred to			Scientin	ic Fulp	uses.	Pur	rpose	
Common Name	Permit Number or Address						Date		ransfer			
										+		

Form 3-202-4 Rev 7/2007

B. <u>NEW ACQUISITIONS</u>. Please provide a summary of all migratory birds acquired during the report year, <u>categorized by species</u>. The quantity in the **Received** column should equal the sum quantities in the **Disposition** columns. (For example: Robins: 14 - 10, 0, 1, 2, 1). Also complete sections D and E for Pending and Transferred birds, respectively. <u>All</u> birds, including birds reported in C, D, and E, must be reported here.

	Total Number		Disposit	Disposition (enter quantity)					
Common Name	Received	Released	Transferred	Pending	Euthanized	Died			
Form 2 202 4 Boy 7/2007		j		1019 0022 E	<u> </u>	<u> </u>			

	PPLEMENTAL SHEET -									IT NO			Page
A, C to th	c, or D. Use as <u>additional specifical spe</u>	<u>pace</u> fo vided l	or completing so	ections A, C, OSITION C	and D. Please ODES: R=Rele	indicate ased; 7	in the <u>T=Tr</u> an	left co sferre	olumn d; <u>P</u> =P	the lett ending	ter of the ; <u>E</u> =Euth	section that on that on the contract of the section that of the section is section to the section that of	corresponds Died.
	Common Name				se/Nature Injury		Disposit T				(A)	position or inty&State	
	Common rume		ricquireu	- OI	Injury	K	1	1	E	D	(_)		
E.	TRANSFERS . Please corprovide the permit number												Address,
	$\mathbf{R} = \text{Release}; \ \mathbf{C} = \text{Continuo}$				tion or Scientifi	ic Purpo	ses;	Dead-l					
	Common Name		Name		Transferred to (Recipient) Permit Number or Address							Date	Purpose of Transfer

Form 3-202-4 Rev 7/2007 OMB No. 1018-0022 Expires x/xxxxxx

FEDERAL FISH AND WILDLIFE PERMIT REPORT

Paperwork Reduction Act, Privacy Act, and Freedom of Information Act - Notices

In accordance with the Paperwork Reduction Act of 1995 (44 U.S.C. 3501, et seq.) and the Privacy Act of 1974 (5 U.S.C. 552a), please be advised:

- The gathering of information on fish and wildlife is authorized by: (Authorizing statutes can be found at: http://www.fws.gov/permits/ltr/ltr.shtml.)
 - a. Bald and Golden Eagle Protection Act (16 U.S.C. 668), 50 CFR 22;
 - b. Migratory Bird Treaty Act (16 U.S.C. 703-712), 50 CFR 21;
 - c. General Provisions, 50 CFR 10;
 - d. General Permit Procedures, 50 CFR 13; and
 - e. Wildlife Provisions (Import/export/transport), 50 CFR 14.
- 2. Information requested in this form is purely voluntary. However, submission of requested information is a condition of your permit under the above laws. Failure to provide all requested information may be sufficient cause for the U.S. Fish and Wildlife Service to revoke your permit. Response is not required unless a currently valid Office of Management and Budget (OMB) control number is displayed on form.
- 3. Disclosures outside the Department of the Interior may be made without the consent of an individual under the routine uses listed below, if the disclosure is compatible with the purposes for which the record was collected. (Ref. 68 FR 52611, September 4, 2003)
 - a. Routine disclosure to subject matter experts, and Federal, tribal, State, local, and foreign agencies, for the purpose of obtaining advice relevant to making a decision on an application for a permit or when necessary to accomplish a FWS function related to this system of records.
 - b. Routine disclosure to Federal, tribal, State, local, or foreign wildlife and plant agencies for the exchange of information on permits granted or denied to assure compliance with all applicable permitting requirements.
 - c. Routine disclosure to Federal, tribal, State, and local authorities who need to know who is permitted to receive and rehabilitate sick, orphaned, and injured birds under the Migratory Bird Treaty Act and the Bald and Golden Eagle Protection Act; federally permitted rehabilitators; individuals seeking a permitted rehabilitator with whom to place a bird in need of care; and licensed veterinarians who receive, treat, or diagnose sick, orphaned, and injured birds.
 - d. Routine disclosure to the Department of Justice, or a court, adjudicative, or other administrative body or to a party in litigation before a court or adjudicative or administrative body, under certain circumstances.
 - e. Routine disclosure to the appropriate Federal, tribal, State, local, or foreign governmental agency responsible for investigating, prosecuting, enforcing, or implementing statutes, rules, or licenses, when we become aware of a violation or potential violation of such statutes, rules, or licenses, or when we need to monitor activities associated with a permit or regulated use.
 - f. Routine disclosure to a congressional office in response to an inquiry to the office by the individual to whom the record pertains.
 - g. Routine disclosure to the General Accounting Office or Congress when the information is required for the evaluation of the permit programs.
 - h. Routine disclosure to provide addresses obtained from the Internal Revenue Service to debt collection agencies for purposes of locating a debtor to collect or compromise a Federal claim against the debtor or to consumer reporting agencies to prepare a commercial credit report for use by the FWS.
- 4. For individuals, personal information such as home address and telephone number, financial data, and personal identifiers (social security number, birth date, etc.) will be removed prior to any release of the application.
- 5. The public reporting burden on the applicant for information collection varies depending on the activity for which a permit is requested. The relevant burden for a Rehabilitation permit annual report is 3 hours. This burden estimate includes time for reviewing instructions, gathering and maintaining data and completing and reviewing the form. You may direct comments regarding the burden estimate or any other aspect of the form to the Service Information Clearance Officer, U.S. Fish and Wildlife Service, Mail Stop 222, Arlington Square, U.S. Department of the Interior, 1849 C Street, NW, Washington D.C. 20240.

Freedom of Information Act - Notice

For organizations, businesses, or individuals operating as a business (i.e., permittees not covered by the Privacy Act), we request that you identify any information that should be considered privileged and confidential business information to allow the Service to meet its responsibilities under FOIA. Confidential business information must be clearly marked "Business Confidential" at the top of the letter or page and each succeeding page and must be accompanied by a non-confidential summary of the confidential information. The non-confidential summary and remaining documents may be made available to the public under FOIA [43 CFR 2.13(c)(4), 43 CFR 2.15(d)(1)(i)].