



**FEDERAL FISH AND WILDLIFE PERMIT APPLICATION FORM**  
**Special Double-Crested Cormorant**  
**(Migratory Bird Treaty Act; 50 CFR 21.123)**



**U.S. FISH AND WILDLIFE SERVICE**  
**Division of Migratory Bird Management**

**TYPE OF REQUEST**

- New Application**
- Renewal**
- Amendment**

If requesting a renewal or amendment, please provide the permit #: \_\_\_\_\_

**BEFORE FILLING OUT THIS FORM**, please access the [Return Addresses](#) (to obtain the email/postal mail addresses where this form can be returned); and read the [Permit Information](#), [Frequently Asked Questions](#), and form [Instructions](#). Please retain the "NOTICES" page for your records.

**NOTE:** A Federal Special Double-Crested Cormorant permit is available only to a State or Tribal fish and wildlife management agency responsible for migratory bird management on lands and waters under their jurisdiction. Anyone conducting activities under authority of this permit must be listed as a subpermittee. Subpermittees must be at least 18 years old. Nonlethal methods to resolve conflicts must be attempted before lethal take occurs.

Complete Sections A or B, and C, D, and E of this application. U.S. address may be required in Section C, see instructions for details. **See instructions on last page for information on how to make your application complete and help avoid unnecessary delays.**

<b>A. Complete if applying as an individual</b>			
1.a. Last name	1.b. First name	1.c. Middle name or initial	1.d. Suffix
2. Date of birth (mm/dd/yyyy)	3.a. Telephone number	3.b. Alternate telephone number	3.d. E-mail address

<b>B. Complete if applying on behalf of a State agency or Tribe</b>			
1.a. Name of Agency or Tribe			
4.a. Principal Officer Last Name	4.b. Principal Officer First Name	4.c. Principal Officer Middle Name/Initial	4.d. Suffix
5. Principal Officer Title		6. Primary Contact Name	
7.a. Business Telephone Number	7.b. Alternate Telephone Number	7.c. Business Fax Number	7.d. Business E-mail Address

<b>C. All applicants complete address information</b>					
1.a. Physical address (Street address; Apartment #, Suite #, or Room #; no P.O. Boxes)					
1.b. City	1.c. State	1.d. Zip code/Postal code	1.e. County/Province	1.f. Country	
2.a. Mailing Address (include if different than physical address; include name of contact person if applicable)					
2.b. City	2.c. State	2.d. Zip code/Postal code	2.e. County/Province	2.f. Country	

<b>D. All applicants MUST complete</b>	
1. Processing fees – none required. Tribal and State agencies, and those acting on behalf of such agencies, are exempt from the processing fee (50 CFR 13.11(d)(3)(i).	
2. Do you currently have or have you ever had any Federal Fish and Wildlife permits? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, list the number of the most current permit you have held or that you are applying to renew/re-issue: _____	
3. <b>Certification:</b> I hereby certify that I have read and am familiar with the regulations contained in Title 50, Part 13 of the Code of Federal Regulations and the other applicable parts in subchapter B of Chapter I of Title 50, and I certify that the information submitted in this application for a permit is complete and accurate to the best of my knowledge and belief. I understand that any false statement herein may subject me to the criminal penalties of 18 U.S.C. 1001.	
_____ <b>Signature of applicant/Principal Officer (No stamped signatures. Electronic signatures accepted.)</b>	_____ <b>Date of signature (mm/dd/yyyy)</b>



- 4) Describe your long-term plans to eliminate or significantly reduce the continued killing of double-crested cormorants or destruction of eggs/nests.
- 5) The name and telephone number of the individual in your agency who will be in charge of the double-crested cormorant management activities authorized under your permit.
- 6) **Subpermittees:** Anyone who will be assisting you with the permitted activities or acting as your agent must either have their own Federal migratory bird permit for the activity or be identified by you, in writing, as a subpermittee under your permit. Subpermittees must be at least 18 years old. As the primary permittee, you will be responsible for ensuring that your subpermittees are properly trained and adhere to the terms of your permit. Provide the name of any subpermittees who will be conducting activities under your permit. Include the name and contact information of any commercial company that may be contracted to conduct the work.

- 7) By requesting this permit, I acknowledge that, if a permit is issued, the State/Tribe will be responsible for the following:
- (a) A record keeping system for tracking take that includes: the specific location (GPS coordinates in decimal degrees), the county, a description of the non-lethal methods implemented and their general efficacy for resolving the conflict, the number of double-crested cormorants and, if applicable, non-target species taken, the method of take, and the purpose of take relevant to the type of conflict (aquaculture, health, t/e, property, stocked fish). Take data must be current, sufficient to ensure tracking within authorized take limits and update at least every 30 days.
  - (b) Activities that fall outside the scope of this permit require a separate Depredation permit. Activities may not occur under both a Depredation permit and this permit.
  - (c) An outreach plan for communicating with the public the activities occurring under this permit, including the implementation non-lethal methods.
  - (d) The Principal Officer is responsible for ensuring all subpermittees (employees and contractors) are fully informed and briefed regarding the regulatory requirements and conditions of this permit.
  - (e) Anyone taking birds under this permit must be skilled in double-crested cormorant identification. Non-target take of any other avian species must be reported to your permit office with your annual report including species, number, and description of events.

- 8) You must retain records legibly written or reproducible in English relating to the activities conducted under your permit for at least 5 years after the date of expiration of your permit. Is the physical address you provided in Section C on page 1 of this application the address where your records will be kept?  Yes  No If "no," provide the physical address:

- 9) I acknowledge that I have read the [Permit Information](#), form [Instructions](#), [Frequently Asked Questions](#); and have accessed the [Return Addresses](#) for information on where I should return this form. I have also filled out all fields and questions in this application. Check this box to acknowledge.

## NOTICES

### PRIVACY ACT STATEMENT

**Authority:** The information requested is authorized by the following: the Bald and Golden Eagle Protection Act (16 U.S.C. 668), 50 CFR 22; the Endangered Species Act (16 U.S.C. 1531-1544), 50 CFR 17; the Migratory Bird Treaty Act (16 U.S.C. 703-712), 50 CFR

21; the Wild Bird Conservation Act (16 U.S.C. 4901-4916), 50 CFR 15; the Lacey Act: Injurious Wildlife (18 U.S.C. 42), 50 CFR 16; Convention on International Trade in Endangered Species of Wild Fauna and Flora (TIAS 8249), 50 CFR 23; General Provisions, 50 CFR 10; General Permit Procedures, 50 CFR 13; and Wildlife Provisions (Import/export/transport), 50 CFR 14.

**Purpose:** The collection of contact information is to verify the individual has an eligible permit to conduct activities that affect protected species. The information the individual provides helps the FWS monitor and report on protected species and assess the impact of permitted activities on the conservation and management of species and their habitats.

**Routine Uses:** The collected information may be used to verify an applicant's eligibility for a permit to conduct activities with protected wildlife; to provide the public and the permittees with permit related information; to monitor activities under a permit; to analyze data and produce reports to monitor the use of protected wildlife; to assess the impact of permitted activities on the conservation and management of protected species and their habitats; and to evaluate the effectiveness of the permit programs. More information about routine uses can be found in the System of Records Notice, Permits System, FWS-21.

**Disclosure:** The information requested in this form is voluntary. However, submission of requested information is required to process applications for permits authorized under the listed authorities. Failure to provide the requested information may be sufficient cause for the U.S. Fish & Wildlife Service to deny the request.

### PAPERWORK REDUCTION ACT STATEMENT

In accordance with the Paperwork Reduction Act (44 U.S.C. 3501 *et seq.*), the U.S. Fish and Wildlife Service collects information necessary to monitor take and disposition of migratory birds, under the applicable laws governing the requested activity, for which a permit is requested, and to respond to requests made under the Freedom of Information Act and the Privacy Act of 1974. Information requested in this form is purely voluntary. However, submission of requested information is required in order to process applications for permits authorized under the above laws. Failure to provide all requested information may be sufficient cause for the U.S. Fish and Wildlife Service to deny the request. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. OMB has approved this collection of information and assigned Control No. 1018-0022.

### ESTIMATED BURDEN STATEMENT

We estimate public reporting for this collection of information averages:

Original submission - paper-based: 16 hours  
Amended submission - paper-based: 4 hours  
Original submission - electronic: 14 hours  
Amended submission - electronic: 3 hours

These estimates include time for reviewing instructions, gathering and maintaining data and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of the form to the Service Information Clearance Officer, Fish and Wildlife Service, U.S. Department of the Interior, 5275 Leesburg Pike, MS: PRB (JAO/3W), Falls Church, VA 22041-3803, or via email at [Info\\_Coll@fws.gov](mailto:Info_Coll@fws.gov). **Please do not send your completed form to this address.** Questions regarding migratory bird permits should be sent to the appropriate regional (contact information can be found at <https://www.fws.gov/program/migratory-bird-permit/contact-us>).

### FREEDOM OF INFORMATION ACT STATEMENT

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 Freedom of Information Act (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 2.26 – 2.33].