

Application for Raptor Propagation Permit

Please complete this form and send it along with required documents to: Falconry Coordinator, Department of Natural Resources, Division of Ecological and Water Resources, Nongame Wildlife Program, 500 Lafayette Road, Box 25, St. Paul, MN 55155-4025. **The permit process will take 4-6 weeks, please plan accordingly.**

APPLICANT INFORMATION:

NAME _____
(First) (Middle) (Last)

PHONE NUMBER (HOME) _____ (WORK) _____ (CELL) _____

E-MAIL _____
(Permits and most communication are mailed electronically; to avoid processing delays please provide an email address)

Mailing Address

STREET _____ CITY _____ STATE _____

ZIP _____ COUNTY _____

Facilities Address (if different from above)

STREET _____ CITY _____ STATE _____

ZIP _____ COUNTY _____

Do you own the property where the facilities will be located? **YES / NO**

If the answer is no, the rental certification (below) must be submitted.

RENTER'S CERTIFICATION:

As owner of the property on which the above named applicant's raptor propagation facilities will be located, I agree that their raptor propagation facilities and raptors may be inspected by Minnesota Department of Natural Resources authorities at any reasonable time of day in my presence; except that the authorities may not enter the facilities or disturb the raptors unless the above named applicant is present.

Signature of Property Owner *Printed name* *Date*

Email address *Phone number*

Permit request and requirements:

Are you requesting a:

____ **New Permit**

1. Submit documentation to verify EITHER
 - A. You are the holder of master falconry permit * (please attach copies of any current or previous falconry licenses or permits)

OR

- B. You can demonstrate through written documentation at least two (2) years' experience propagating raptors (please contact the falconry coordinator for more specific documentation that must be submitted); AND EITHER
 - 1) You are the holder of a general falconry permit* with 24 months' experience with a raptor at the general level (please attach copies of any current or previous falconry licenses or permits); OR
 - 2) You are conducting research on raptors for an educational or governmental institution (please attach copies of your institutional affiliation and research proposal).
2. Submit a copy of your MN DNR inspection form and facilities photos
3. Submit a copy of your Federal Raptor Propagation permit and application with facility schematics**
4. For established raptor propagators relocating to Minnesota only: in addition to the other requirements, please include an updated page 2 of the federal permit application along with copies of the 3-186a's and Board of Animal Health certifications for raptors currently in your possession that you intend to import to Minnesota.

____ **Permit Renewal**

1. Attach a copy of your current Federal Raptor Propagation permit
2. Submit a copy of your DNR inspection form and facilities photos
3. Submit a copy of your current facility schematics**

____ **Permit Modification--Circle: NAME CHANGE / ADDRESS CHANGE**

____ **Permit Class Upgrade**

1. Please submit current facility schematics** to account for the additional birds

***To qualify, these permits must be in good standing. "Good standing," determined by falconer's file, means they have a valid state permit, which is not under review and their required paperwork is submitted and complete.**

****Facility schematics must include: dimensions for each holding area, the number of birds stored in each holding area, and whether the birds will be tethered or free in each holding area.**

PLEASE CONTACT THE FALCONRY COORDINATOR IF YOU HAVE QUESTIONS ON ANY OF THESE REQUIREMENTS

Requested Class:

Please check the category below for the maximum number of breeding raptors that you intend to keep under your propagation permit for the next three years (do not count your falconry birds).

STANDARD PROPAGATOR

___ 1-6

SPECIALIZED PROPAGATOR

___ 7-25

___ >25 (please complete page 4)

Maximum number of breeding raptors you propose to keep under this permit: _____

OTHER INFORMATION:

What is the purpose of your raptor propagation program (please circle all that apply)?

Falconry / Education / Business / Reintroduction / Research / Abatement / Other _____

Which species do you intend to propagate?

Do you plan to produce hybrids? **Yes / No**

What are your plans for the offspring produced as a result of propagation?

For renewal permits and permit class upgrades: If you indicated a change in size or purpose to your breeding program for this renewal period, briefly describe any intended changes and the reason for those changes.

APPLICANT'S CERTIFICATION:

I hereby certify that I have read and understand the federal and state laws and regulations on raptor propagation and that the information given in this application is true and correct to the best of my knowledge. Further, I hereby certify that I will maintain my facilities in accordance with federal regulations, and in accordance with federal regulations, and in accordance with federal regulations, I agree that, in my presence, my propagation raptors, facilities, equipment, and records may be inspected during any reasonable time of the day, on any day of the week, and without advanced notice.

Signature of applicant

Date

TO BE COMPLETED BY SPECIALIZED PROPAGATORS WITH FACILITIES >25 BIRDS:

A. RAPTOR CARE:

Will you require assistants to care for the number of birds that you indicated on page 3?

If so, please indicate how many: Fulltime _____ Part-time _____

If you do not require assistants, who will care for your birds if you are out of town or unable to care for them yourself?

Name Phone Number Falconry/Propagation Permit Number

What veterinarian facilities will you be using?

Vet or Clinic Name Phone number

Address

B. RAPTOR FOOD REQUIREMENTS:

What types of food do you intend to feed the raptors under your permit?

Do you plan to raise or purchase the food needed to feed the raptors under your permit?

What is the estimated daily and monthly quantity of food that you will need to adequately feed the raptors under you permit?

Will you need additional state or local permits licensing, or environmental review for the number of raptors and prey that you will be housing? Please list and attach copies of documentation.

C. OFFSPRING:

Unless part of an approved re-introduction program, propagated raptors may not be released to the wild, even for species native to Minnesota. Who do you anticipate will be the primary purchasers or recipients of the raptors produced at your facility?

What contingency plans do you have for your program and offspring if you do not have the anticipated demand for your birds?
