

Nebraska Falconry Permit Renewal Application Form

Return to: Falconry Permitting Nebraska Game and Parks Commission 2200 N. 33rd Street Lincoln, NE 68503 402-471-0641

1.	Applicant's Name:				
2.	Applicant's Address:				
3.	City, State, Zip Code:			IZA	
4.	Daytime phone number:	V	1	HAC	
5.	Email address:				
6.	Location where raptors are housed:		PA	RKS -	
7 <u>. F</u>	alconry Permit Class	8. Applican	ıt's <u>sex</u>	9. Date of Birth:	
☐ Master (fees \$57.00) ☐ Male					
	General (fees \$57.00)	☐ Female			
10. Number of raptors in your possession 11. For each raptor in your possession, list the following information:					
Sp	ecies:		Age:		
Sex:			Date of acquisition:		
Source of acquisition:			Marker number:		

Species:	Age:		
Sex:	Date of acquisition:		
Source of acquisition:	Marker number:		
	1.		
Species:	Age:		
Sex:	Date of acquisition:		
Source of acquisition:	Marker number:		
Species:	Age:		
Sex:	Date of acquisition:		
Source of acquisition:	Marker number:		
- GAME (A)	PARKS -		
Species:	Age:		
Sex:	Date of acquisition:		
Source of acquisition:	Marker number:		
of the modifications.	cations to your indoor/outdoor facilities for ach a sketch, drawn to scale, or photographs		
13. Applicant's signature.			
Signature:	Date:		
Not valid unless signed. Your signature confirms all the in complete, and indicates acceptance and understanding or	nformation provided to issue the permit is accurate and		