



MARK WILLIAMS
COMMISSIONER

EDDIE HENDERSON
COLONEL

MEMORANDUM – PLEASE READ

Please note: As of July 1, 2017 a price increase to this permit will be in effect. As always please check our website often to print paper applications processed by the Special Permit Unit. We do minor updates to applications frequently.

TO: Scientific Collecting Permit Holders
FROM: Special Permit Unit
SUBJECT: Renewal Application

Please fill out, **completely and legibly**, and mail to the Special Permit Unit along with a **n the renewal application, with fee of \$80.00** . (Fee includes the cost of the license plus a \$5 transaction fee.), **together** no later than **March 1, of this year**, as your permit will expire March 31. If you are mailing a check separate, please make sure that your customer number and name is on the check. Missing information will cause delay in processing.

*A required electronic copy of your Scientific Collecting data report (**ONLY**) is to be submitted to Zachariah Abouhamdan, at zachariah.abouhamdan@dnr.ga.gov no later than **April 15, of this year**.

A template of the data form can be downloaded at <http://georgiawildlife.com/conservation/species-of-concern> **Your Renewal application will not be processed until an electronic report has been received.**

***** Please forward all permitting questions to the Special Permit Unit at 770-761-3044**

Since it will not be possible to process all renewals by the expiration date, keep a copy of your renewal application with your previous permit in order to continue your currently permitted activities until your renewal has been processed.

While completing your renewal application, please review the conditions of your previous permit and ensure that they are complete and accurate. If you have added a project or your permit has changed in any way from prior year, please make sure to note this on the application, and provide a proposal and supporting documents such as resumes and a list of sub-permittees to be added to permit. This will help to ensure that your new permit is accurate when reissued. If you have questions about your application or the use of your permit, you may contact the Special Permit Unit at (770) 761-3044.

Rev 9/17 jrh

Georgia Department of Natural Resources
Law Enforcement Division
Special Permit Unit
2070 U.S. Highway 278, S.E.
Social Circle, Georgia 30025
770-761-3044

RENEWAL
SCIENTIFIC COLLECTING PERMIT
\$80.00 FEE MUST ACCOMPANY APPLICATION
(Attach additional sheet if needed for any item below)
(Fee includes the cost of the license plus a \$5 transaction fee.)

Business Account **Individual Account**
FEIN #, Tax ID# _____

- All Applications are to be submitted by mail

The Electronic data form is to be emailed to: zachariah.abouhamdan@dnr.ga.gov ONLY. All permit applications and questions should be directed to the Special Permit Unit at 770-761-3044

1. Applicant Name: _____
Address: _____
City: _____ State: _____ Zip: _____ County: _____
Email: _____ Drivers License # _____ State _____
Business #: _____ Cell # _____
Date of Birth (required): _____ Security Number (required if individual) _____

* Customer ID # _____

** Filed electronic data form at zachariah.abouhamdan@dnr.ga.gov (ONLY) No Yes Permit will not be issued until the form is received

*** Are there any Changes from prior Permit: No Yes please specify:

2. Address and phone number for service of legal process:
Provide one of the following:
(1) An address in Georgia where applicant can be personally served with legal process
(2) Appointment of an agent in Georgia for acceptance of service of legal process, together with the agent's Georgia address; or
(3) Designate the Secretary of State of Georgia for service of legal process.

3. College, University, or Scientific Affiliation:

4. Please check if you will have subpermittees collecting outside of your direct supervision ____ (If so, attach a list of subpermittees.)

5. I desire to collect the following species:

6. Collection Dates or Frequency:

7. I desire to collect by the following methods (specify type, size of gear, etc):

If paying by Credit card, enter card # here: _____ / _____ / _____ / _____ Amount \$ 80.00

Type of card: Visa MasterCard Discover Expiration Date: ____/____/____ Security Code # _____

Credit Card Signature: _____ Rev 9/17 jrh

8. Please check the taxonomic groups you would like to be permitted for:

- | | | | |
|-------------------------------------|-------------------------------------|----------------------------------------|-------------------------------------------|
| Amphibians | <input type="checkbox"/> Non-listed | <input type="checkbox"/> State Listed | <input type="checkbox"/> Federally Listed |
| Birds | <input type="checkbox"/> Non-listed | <input type="checkbox"/> State Listed | <input type="checkbox"/> Federally Listed |
| | <input type="checkbox"/> Migratory | <input type="checkbox"/> Non-migratory | |
| Reptiles | <input type="checkbox"/> Non-listed | <input type="checkbox"/> State Listed | <input type="checkbox"/> Federally Listed |
| Freshwater Fishes | <input type="checkbox"/> Non-listed | <input type="checkbox"/> State Listed | <input type="checkbox"/> Federally Listed |
| Freshwater Mussels and/or Snails | <input type="checkbox"/> Non-listed | <input type="checkbox"/> State Listed | <input type="checkbox"/> Federally Listed |
| Non-Mussel Freshwater Invertebrates | <input type="checkbox"/> Non-listed | <input type="checkbox"/> State Listed | <input type="checkbox"/> Federally Listed |
| Coastal & Estuarine Fishes | <input type="checkbox"/> Non-listed | <input type="checkbox"/> State Listed | <input type="checkbox"/> Federally Listed |
| Coastal & Estuarine Invertebrates | <input type="checkbox"/> Non-listed | <input type="checkbox"/> State Listed | <input type="checkbox"/> Federally Listed |
| Mammals | <input type="checkbox"/> Non-listed | <input type="checkbox"/> State Listed | <input type="checkbox"/> Federally Listed |

List Specific species and numbers to be collected here (use attachments if necessary):

Species or Groups

Common Name

Scientific Nomenclature

Numbers

Please or attach a list if more room in needed

9. I desire to collect at the following locations (for aquatic species, please check the river basins on the attached map where you plan to collect during the permit year. For other species please indicate the county, physiographic region or specific land area where you wish to collect). Please be as specific as possible to ensure a speedy processing of the permit.

- | | | |
|----------------------------------------------|--------------------------------------------|-------------------------------------------|
| <input type="checkbox"/> Tennessee Basin | <input type="checkbox"/> Coosa Basin | <input type="checkbox"/> Tallapoosa Basin |
| <input type="checkbox"/> Chattahoochee Basin | <input type="checkbox"/> Savannah Basin | <input type="checkbox"/> Oconee Basin |
| <input type="checkbox"/> Ocmulgee Basin | <input type="checkbox"/> Flint Basin | <input type="checkbox"/> Ogeechee Basin |
| <input type="checkbox"/> Altamaha Basin | <input type="checkbox"/> Satilla Basin | <input type="checkbox"/> Suwannee Basin |
| <input type="checkbox"/> Saint Marys Basin | <input type="checkbox"/> Ochlockonee Basin | |

O.C.G.A. § 16-10-20: "A person who knowingly and willingly makes a false, fictitious, or fraudulent statement...in any matter within the jurisdiction of any department or agency of state government...shall, upon conviction thereof, be punished by a fine of not more than \$1000 or by imprisonment for not less than one or more than five years, or both."

_____ Date

_____ Signature (in ink)