Submit by Email

APPLICATION FOR SCIENTIFIC AQUATIC PERMIT

(AQUATICS)

INSTRUCTION: Complete and submit by email. Please enclose any additional justification, explanation or proposal that would help evaluate the application. An issued permit is effective for (1) year after date of issue. **An annual collections report, including coordinates of samples sites, is required at or before expiration. No permit can be renewed until a report is received. If you have any questions, please contact, Inv Russell Boles at (615)- 934- 7505 or** Rusty.Boles@tn.gov

◯ NEW ◯ RENEWAL ◯ AMENDED

REQUEST DATE: _____ CURRENT PERMIT # _____ EXPIRATION DATE: _____ DATE OF LAST ANNUAL REPORT: _____

Pursuant to authority of T.C.A. 70-2-213, I request a State of Tennessee Scientific Collection Permit for collection of live or dead wildlife, or their parts, as follows:

Name(s) _____

Address _____

City _____ State _____ Zip Code _____

Organization Name _____

Telephone _____

Email _____

NEED FOR COLLECTION (ATTACH RESEARCH PROPOSAL IF AVAILABLE):

I request permission to take, possess, and transport, for purely scientific purposes, the following species (or categories thereof) and numbers for each species:

Collection Methods:

Locations:

Proposed Disposition:

Dates:

Jeopardy To Collected Animals:

ESTIMATE OF PERCENT OF LOCAL SPECIES POPULATION(S) TO BE TAKE AWAY FROM LOCAL SITE(S):