

- Allow for a minimum of 14 working days for the processing of this application.
- If you are applying for a permit for personal use there is a fee required and must accompany this application.
- Your cheque or money order should be made payable to "The Minister of Finance."
- For a Division 6 species of animal (i.e. hawks, owls) the fee is \$20.00
- For all other species of animals the fee is \$10.00.
- Permits for educational, scientific or ceremonial uses do not require the payment of a fee.
- For information on this or any other permit contact the CITES/WILDLIFE PERMITS CLERK.

SEND THIS APPLICATION AND FEE TO:  
**CITES/WILDLIFE PERMITS CLERK**  
 MANITOBA CONSERVATION  
 WILDLIFE AND ECOSYSTEM  
 PROTECTION BRANCH  
 BOX 24-200 SAULTEAUX CRESCENT  
 WINNIPEG MB R3J 3W3  
 TELEPHONE: 204-945-1893  
 FAX NO.: 204-948-2756

LIST THE ANIMAL THIS PERMIT IS REQUIRED FOR:

**OR** PERSONALLY TAKE IT TO ANY MANITOBA  
 CONSERVATION DISTRICT OFFICE WHERE A  
 NATURAL RESOURCE OFFICER IS LOCATED

**PART A: PARTICULARS ON APPLICANT AND ORIGIN OF SPECIMEN** (print clearly):

NAME OF APPLICANT:		FOUND BY (name):	
ADDRESS:			
CITY OR TOWN:	PROVINCE/STATE	POSTAL/ZIP CODE:	TELEPHONE NUMBER(S)
			(residence) (business)
DATE FOUND:	TIME FOUND:	LOCATION FOUND:	
KNOWN/SUSPECTED CAUSE OF DEATH (check one):			
<input type="checkbox"/> ROADKILL <input type="checkbox"/> BUILDING/WINDOW STRIKE <input type="checkbox"/> ELECTROCUTION <input type="checkbox"/> NATURAL CAUSES <input type="checkbox"/> SHOT <input type="checkbox"/> POISON <input type="checkbox"/> TRAP/SNARE <input type="checkbox"/> OTHER (specify): _____			
INTENDED USE (check one):			
<input type="checkbox"/> PERSONAL <input type="checkbox"/> SCIENTIFIC <input type="checkbox"/> EDUCATIONAL <input type="checkbox"/> CEREMONIAL/RELIGIOUS <input type="checkbox"/> OTHER (specify): _____			
I hereby certify that the information provided in this application is true to the best of my knowledge and request that a permit to possess a dead wild animal be issued to me.			
DATE SIGNED:	SIGNATURE OF APPLICANT:		

**PART B: TO BE COMPLETED BY A NATURAL RESOURCE OFFICER** (check one):

<input type="checkbox"/> I have examined the above specimen(s) and recommend that a permit be issued. The specimen is being held pending reply from the Director of Wildlife.	
<b>OR</b>	
<input type="checkbox"/> I have examined the above specimen(s) and recommend that a permit not be issued for the following reason(s). The specimen has been seized pending direction from the Director of Wildlife for disposal.	
<input type="checkbox"/> SHOT <input type="checkbox"/> TRAPPED <input type="checkbox"/> SNARED <input type="checkbox"/> POISONED <input type="checkbox"/> INELIGIBLE SPECIES <input type="checkbox"/> NON-RESIDENT APPLICANT <input type="checkbox"/> SPECIMEN ORIGINATED FROM OUTSIDE MANITOBA <input type="checkbox"/> OTHER (specify): _____	
COMMENTS:	
NAME OF NRO (print):	DISTRICT (print):
SIGNATURE OF NRO:	OFFICE TELEPHONE :