



MARYLAND DEPARTMENT OF NATURAL RESOURCES

WILDLIFE AND HERITAGE SERVICE

**APPLICATION FOR DEER CARCASS SALVAGE PERMIT/LICENSE**

**INSTRUCTIONS**

A. THIS IS AN APPLICATION FOR A WILDLIFE PERMIT/LICENSE. COMPLETE ALL THE INFORMATION IN PARTS 1-13 AND 17-21.  
B. RETURN WITH FEE SHOWN IN PART 16 TO PERMITS COORDINATOR, WILDLIFE & HERITAGE SERVICE, Tawes State Office Building, E-1, 580 Taylor Avenue, Annapolis, MD 21401. MAKE CHECKS PAYABLE TO THE "DEPARTMENT OF NATURAL RESOURCES."

**CURRENT INFORMATION**

1. NAME

2. STREET

3. CITY

4. STATE/ZIP

5. COUNTY

6. PHONE - HOME

7. PHONE - WORK

8. FAX

9. EMAIL

10. DATE OF BIRTH

11. NAME AND TITLE OF PRINCIPAL OFFICER (IF #1 IS A BUSINESS)

12. SOCIAL SECURITY OR FEDERAL TAX #

13. LOCATION WHERE ACTIVITY WILL BE CONDUCTED (IF APPLICABLE):

14. TYPE: DEER CARCASS SALVAGE

15. NEW PERMIT/LICENSE WILL EXPIRE ONE YEAR FROM THE DATE OF ISSUANCE

16. FEE: \$100.00

17. CHECK ALL ACTIVITIES THAT YOU ARE APPLYING FOR:

DEER CARCASS REMOVAL FROM HIGHWAYS AND/OR PRIVATE PROPERTY

18. CHECK ONE OF THE FOLLOWING TO COMPLY WITH MARYLAND'S WORKMEN COMPENSATION ACT (ARTICLE 1-401).

I AM:

SUPPLYING DNR WITH A CERTIFICATE OF INSURANCE.

SUPPLYING DNR WITH INSURANCE BINDER NUMBER \_\_\_\_\_

SELF-EMPLOYED OR EMPLOY ONLY FAMILY MEMBERS, AND THEREFORE I AM NOT REQUIRED TO COMPLY WITH THIS

LAW.

19. I HEREBY APPLY FOR THE ABOVE PERMIT/LICENSE AND CERTIFY UNDER PENALTY OF PERJURY THAT THE INFORMATION HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SIGNATURE OF APPLICANT

DATE