

SCIENTIFIC COLLECTING PERMIT GENERAL INSTRUCTIONS

Read these instructions carefully and complete all the information requested on the form. Attach additional items as requested.

- ▶ **Personal Information:** Provide all information requested.
- ▶ **Type of Permit Requested:** A research permit covers projects that handle or collect live fish and wildlife. Salvage permits cover the collection of dead or crippled fish or wildlife for educational or research purposes.
- ▶ **Applicant's Qualifications:** (1) You may attach a resume which contains, at a minimum, your educational background, current position and previous experience relative to the project in place of completing the Qualifications Specific to the Project. (2) Provide specific qualifications (for example, 12 years of research experience on mussels) related to the proposed project.
- ▶ **Individuals Working Under Direction of Applicant:** Provide a list of individuals that will be working under direct supervision of the applicant. In some cases, each individual may be required to obtain a permit.
- ▶ **U.S. Fish and Wildlife Service Permits:** Provide a list of permits that you hold or will apply for which are relevant to this project. To obtain a U.S. Fish and Wildlife Permit, write or call the U.S. Fish and Wildlife Service, Migratory Bird Permit Office, Bishop Henry Whipple Federal Building, 1 Federal Drive, Ft. Snelling, MN 55111-4056; Phone: 612/713-5436.
- ▶ **Description of Project:** (1) You must attach a copy of the project proposal including scope, objectives, justification and method in place of completing the Description of Project Section. (2) Methods that sample or collect fish or wildlife must be specifically outlined. (3) Fauna to be sampled, handled or collected must be identified along with the type of investigation (e.g., banded, live-trapped, electroshocked) to be conducted on that fauna. (4) If an endangered or threatened species is involve, you must justify why the project must use the species. (5) If live specimens are to be collected, justify why this collecting needs to take place. (6) The disposition of all collected or salvaged specimens must be specified. If the specimens are to be in a museum collection, the collection must be identified.
- ▶ **Location of Project:** (1) If your project is located on a dedicated Illinois Nature Preserve, you must contact the Illinois Nature Preserve Commission, One Natural Resources Way, Springfield, IL 62701-1271; Phone: 217/785-8686. (2) If your project is located on a site owned or managed by the Illinois Department of Natural Resources, you must obtain approval of the site superintendent and the Division of Resource Protection and Stewardship, One Natural Resources Way, Springfield, IL 62702-1271; Phone: 217/785-8774.
- ▶ **Return application to:** Illinois Department of Natural Resources
ORC - Scientific Collecting Permits



One Natural Resources Way
Springfield, IL 62702-1271

NOTE: Please allow two weeks for your permit to be processed. Thank You.

Illinois Department of Natural Resources Scientific Permit Application

Please Type or Print

Personal Information

Name of Applicant: _____ Birthdate: ____ / ____ / ____

Organization: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Daytime Telephone Number: (____) _____ Fax Number: (____) _____

Type of Permit Requested: Research Salvage E-Mail Address: _____

Applicant's Qualifications: *(You may attach resume)*

Qualifications Specific to the Project: _____

Individuals Working Under Direction of Applicant

Name	Address	Birthdate
_____	_____	____ / ____ / ____
_____	_____	____ / ____ / ____
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U.S. Fish and Wildlife Service Permits

Master Permittee	Permit Type	Permit Number

Description of Project: (You may attach project proposal)

Title of Project: _____

Duration of Project: _____

Organization Sponsoring the Project: _____

Funding Source: _____

Description of Monitoring, Sampling or Collecting Procedures: _____

Specific Flora, Fauna or Material to be Monitored, Sampled or Collected

Species, Family, Order, etc.	Type of Investigation	Number of Specimens

Address, General Location and County(ies): _____

I hereby certify that all statements made on the application are correct to the best of my knowledge.

Signature of Applicant: _____ Date ____ / ____ / ____