

Kentucky Falconry Permit Application

New Renewal – Current Permit # (Requ	uired)
APPLICANT INFORMATION	
Name of Applicant (First, Middle Initial and Last Name):	Office Use Only Date:
Social Security # or Federal Tax I.D. #:	Reviewed by: Approved: Yes No
Name of Business (if applicable)	& V
Mailing Address:	
City:	County (if resident) Zip Code:
Phone: Email:	
PAYMENT INFORMATION	
Total Amount Enclosed:	SX
Commercial License & Fees: fw.ky.gov/Licenses/Pages/Comm	nercial-License-Fees.aspx
Statement of Fact: (Required by KRS 164.772)	
Kentucky Higher Education Assistance Authority. I understan	ment obligation under any financial assistance program with nd that if I am in arrears or default on a repayment obligation Education Assistance Authority, my license or permit may not
Statement:	
I, the undersigned, hereby state that upon signing this instru Resources (KDFWR) and all of it's employees shall be release of this license or permit. I certify that I have read and unders best of my knowledge, the information herein is correct and	ed of any liability that might occur as a result of my issuance stand 301 KAR 2:195 Further, I certify that, to the
Signature:	Date:
Y	
	Make Checks payable to KDFWR
	Mail application and payment to: Kentucky Department of Fish and Wildlife Resources #1 Sportsman's Lane

Frankfort, KY 40601 ATTN: Kentucky Falconry

Permit Class Type (check one):	Apprentice ()	General ()	Master ()		
Application Type (check one): Upgrade - no fee if current permit h KY resident facility relocation - no fee Non-resident moving to Kentucky (Facilities Inspection Y/N Support	nas not yet expire ee if current pern	nit has not y			6
Falconry facilities located on property owner of No, see 50 C.F.R. Part 21.29 (d) (2).				20	
	¥ HP	3/41/Y JU :	³ /赵谐洧³/霜/a	ŢĔ Į-SĬ, —	
Address					
City	StateZi _l	p	County		
Sponsors: I would like to be included in	the list of potential	sponsors for	apprentices (check o	ne): Yes ()	No()
$\times \times 10^{10} \mathrm{m}^{-1} $	/ ¥		3 ,		
Apprentice applicants: You must submit must include your sponsor's name, address sponsor will assist you in learning about the species of raptor(s) is most appropriate for	s, telephone number, e husbandry and train	and falconry paing of raptors,	ermit number. The le relevant wildlife laws	tter shall also state and regulations, an	how the d which
First Time General Class Applicants: You stating that you have practiced falconry with for an average of 6 months per year, with a raptors and length of time held.	h a wild raptor for at l	east 2 years, ir	ncluding maintaining, t	raining, and hunting	the raptor
First Time Master Class Applicants: You general or master class falconer, attesting an average of 4 months a year, in at least	that you have actively				
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I.certify.that.I.have.read.and.am.tamiliar.with.th Regulations.and.the.other.applicable.parts.in. complete.and.accurate.to the.best.of.my.kn the.criminal.penaltles.ot.7 40[S]C.766[.subchapter.B.of.chapt	ter.I.of.title. 🕕 (5?.and.that.the.informa	ition.I.have.submitte	
Cřetí Hall IIII (T				? Ï ₹ 4	
If applicant.is.under.7 4 .years.of.age?.a their activities.under.this.permit	.parent.or.legal.gua	rdian.must.sig	n.this.application?.aı	nd.is.legally.respor	sible.for.

* Application must include a Raptor Facilities Inspection Form approved and signed by a Conservation Officer.

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* Mail completed application and check or money order to: ATTN: Falconry Permit, The Kentucky Department of Fish &

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Not effective until Spring of 2026