Fee: \$150.00 Office Use Only Circle one: New Applicant Renewal – Permit Number Date Date Date Applicant Information Social Security # or FEIN (Required) Name of Applicant	
Renewal – Permit Number Applicant Information Social Security # or FEIN (Required) Name of Applicant Business Name (if applicable)	
Social Security # or FEIN (Required) Name of Applicant Business Name (if applicable)	
Name of Applicant Business Name (if applicable)	
Business Name (if applicable)	
Address Zip	
Bus. Phone Home Phone Email Address	
Shooting Area Information	
Type of Preserve* (check one):	
Shooting Area Name Commercial	
Location (Street Address and City)	
County Size of Shooting Area (acres)	
Species Available to Hunt (Check all that apply):	
BobwhitePheasantChukarMallardHoofed Animals (Renewal G	Only)
My signature below indicates that I certify that I have read and understand the information included on this application and in 301 K Further, I certify that all information contained in this application is correct. I agree to comply with all provisions of the regulation. I fu that I have not been convicted of a fish and wildlife violation in the last year, including KRS Chapter 150, KAR Title 301 and federal wildlife laws.	urther certify
Receipt and cashing of payment does not imply approval of permit request. Correct payment must accompany application.	
(Signature) (Date)	
Application Approved or Denied (Conservation Officer Signature) (Date)	
Mail completed application and check or money order to: KY Department of Fish and Wildlife Resources, #1 Sportsman's Ln, Frankfort, KY 40601 Area Permit	Atta: Shooting

* For informational purposes only.