



Exotic Species Research Permit
Issuance Application
(for exotic fish, shellfish and aquatic plants)

\$263

1. Applicant's Name: _____ SS #: _____
Date of Birth: _____ Driver's License #: _____ State: _____
Address: _____
Telephone: Home: (_____) Business: (_____) _____
E-mail Address: _____
Company's Name: _____
Address: _____
Profession: _____ College Degree (s): _____

2. Applicant represents or is associated with:
University or College: _____ Commercial Firm: _____
Federal Agency: _____ Non-Profit: _____
State or Local Agency: _____ Organization: _____
Public School System: _____ Other: _____

3. RESEARCH PROPOSAL: Please attach a detailed research proposal including Objectives, Justification, Procedures, and Projected Completion Date.

4. Has the applicant been found in violation of rules under Parks and Wildlife Code Chapters 12 or 66, or Agriculture Code Chapter 134 of the Texas during the prior permitting period?
[] Yes [] No
If "yes," please explain: _____

5. Facility Owner's Name: _____
Address and Location: _____

(attach map to indicate specific location)

6. List Exotic Species to be handled during permit period:

Common Name	Scientific Name	No. of Specimens
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

7. Specimens will be disposed of as follows: _____

8. If research facility is located with the EXOTIC SPECIES EXCLUSION ZONE (Defined in 57.111 of the Harmful or Potentially Harmful Exotic Fish, Shellfish and Aquatic Plants Proclamation) please include an EMERGENCY PLAN: (A detailed plan explaining what methods will be used to prevent accidental release or escapement in the event of a natural catastrophe, such as a tropical storm or hurricane).

9. Will the facility be designed such that a discharge of waste into or adjacent to state waters will, or is likely to occur? [] Yes [] No

If yes, please provide the appropriate wastewater discharge authorization or exemption from the Texas Natural Resource Conservation Commission.

If no, please provide documentation to demonstrate that the facility is designed and will be operated in such a manner that no discharge of waste into or adjacent to state waters will, or is likely to occur.

10. Contact person for facility inspection:

Name: _____ Phone: (_____) _____

Date requested for final inspection: _____

11. I have received and read the (1) Harmful or Potentially Harmful Exotic Fish, Shellfish and Aquatic Plant rules, and (2) will permit the Department to inspect facilities and remove selected specimens from my exotic species stocks during normal business hours, and (3) allow authorized Department personnel to randomly take samples of live exotic species from shipments for identification and analysis at any time.

SIGNATURE

DATE

This application will not be considered unless completed fully. Return application with \$263 fee to:

**Permit Coordinator, Inland Fisheries
Texas Parks and Wildlife Department
4200 Smith School Rd.
Austin, TX 78744**

FOR ASSISTANCE IN COMPLETING THIS FORM, PLEASE CALL 512-389-4444
OR dial toll-free 1-800-792-1112 and request extension 4444.

Texas Parks and Wildlife Department maintains the information collected through this form. With few exceptions, you are entitled to be informed about the information we collect. Under Sections 552.021 and 552.023 of the Texas Government Code, you are also entitled to receive and review the information. Under Section 559.004, you are also entitled to have this information corrected.