



MISSOURI DEPARTMENT OF CONSERVATION
 P.O. BOX 180
 JEFFERSON CITY, MO 65102

OFFICE USE ONLY

PHONE: (573) 522-0107
 FAX: (573) 751-4864
 EMAIL: COMMERCIALPERMITS@MDC.MO.GOV

Application for Wildlife Hobby Permit (CODE 530)

All required (*) fields must be completed or application will be returned to applicant for completion.

SECTION 1: If renewing a commercial permit, enter the permit number here. Permit #:

SECTION 2: Individual Information (Permit will be issued in the individual's name.)

*County: _____

*Individual Name: _____

Doing Business As (If applicable – provide fictitious business name registered with MO Secretary of State): _____

*Address: _____

*City: _____ *State: _____ *ZIP Code: _____

If PO BOX, provide physical address: _____

*Telephone: _____ Email: _____

PERMIT TYPE		PRICE															
<input type="checkbox"/> Wildlife Hobby Permit (Code 530)		\$11.00															
	<table border="1"> <thead> <tr> <th>TAG TYPE</th> <th>PRICE</th> <th># REQUESTED</th> <th>TAG TOTAL</th> </tr> </thead> <tbody> <tr> <td>Pheasant Leg Bands (per 100)</td> <td>\$13.00</td> <td>X _____ = _____</td> <td></td> </tr> <tr> <td>Quail Leg Bands (per 100)</td> <td>\$13.00</td> <td>X _____ = _____</td> <td></td> </tr> <tr> <td colspan="3" style="text-align: right;">Total Amount Due: \$</td> <td>_____</td> </tr> </tbody> </table>	TAG TYPE	PRICE	# REQUESTED	TAG TOTAL	Pheasant Leg Bands (per 100)	\$13.00	X _____ = _____		Quail Leg Bands (per 100)	\$13.00	X _____ = _____		Total Amount Due: \$			_____
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LOCATION – Complete this section if wildlife is held at a location other than address above.

Location (County): _____ Section: _____ Township: _____ Range: _____

Location Address (if applicable): _____ Area Acreage: _____

If your street address is different than your mailing address please complete this section. Complete address must be provided in case contact by a conservation agent is required. If you live in a rural area please provide directions to your location.

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Directions: _____

***SPECIES – List species to be covered by permit**

Conservation Agent Use Only

Approved Disapproved

Signature: _____

Date: _____

Signature constitutes acceptance of all rules pertaining to the above permit(s) according to the *Wildlife Code of Missouri*.

Applicant Signature: _____ Date: _____

All permits expire June 30 unless otherwise provided in the *Wildlife Code of Missouri*.
 This is not a permit and does not entitle the applicant to operate.

Check enclosed (Made payable to: **Missouri Department of Conservation**)

Credit/Debit card holder agrees to perform the obligations set forth in the Cardholder's agreement with the Issuer. As required by State Law, payments by debit or credit card will be charged an extra convenience fee according to the chart below. The fee will be added to the amount of the purchase and the cardholder's statement will show the combined amount. This fee is paid to the payment processor, not the Missouri Department of Conservation.

Credit/Debit Card Use Fees

2% of transaction amount, plus \$.25 per transaction will be added to your total

Credit Card Type: Visa MasterCard Discover

Credit/Debit Card Number: _____

Expiration Date: _____ 3-Digit Security Code: _____

Phone Number (**Required**): _____ Signature: _____

Mail application to:

**Missouri Department of Conservation
Attn: Commercial Permits
P.O. Box 180
Jefferson City, MO 65102**

**Fax: (573) 751-4864
Email: COMMERCIALPERMITS@MDC.MO.GOV**