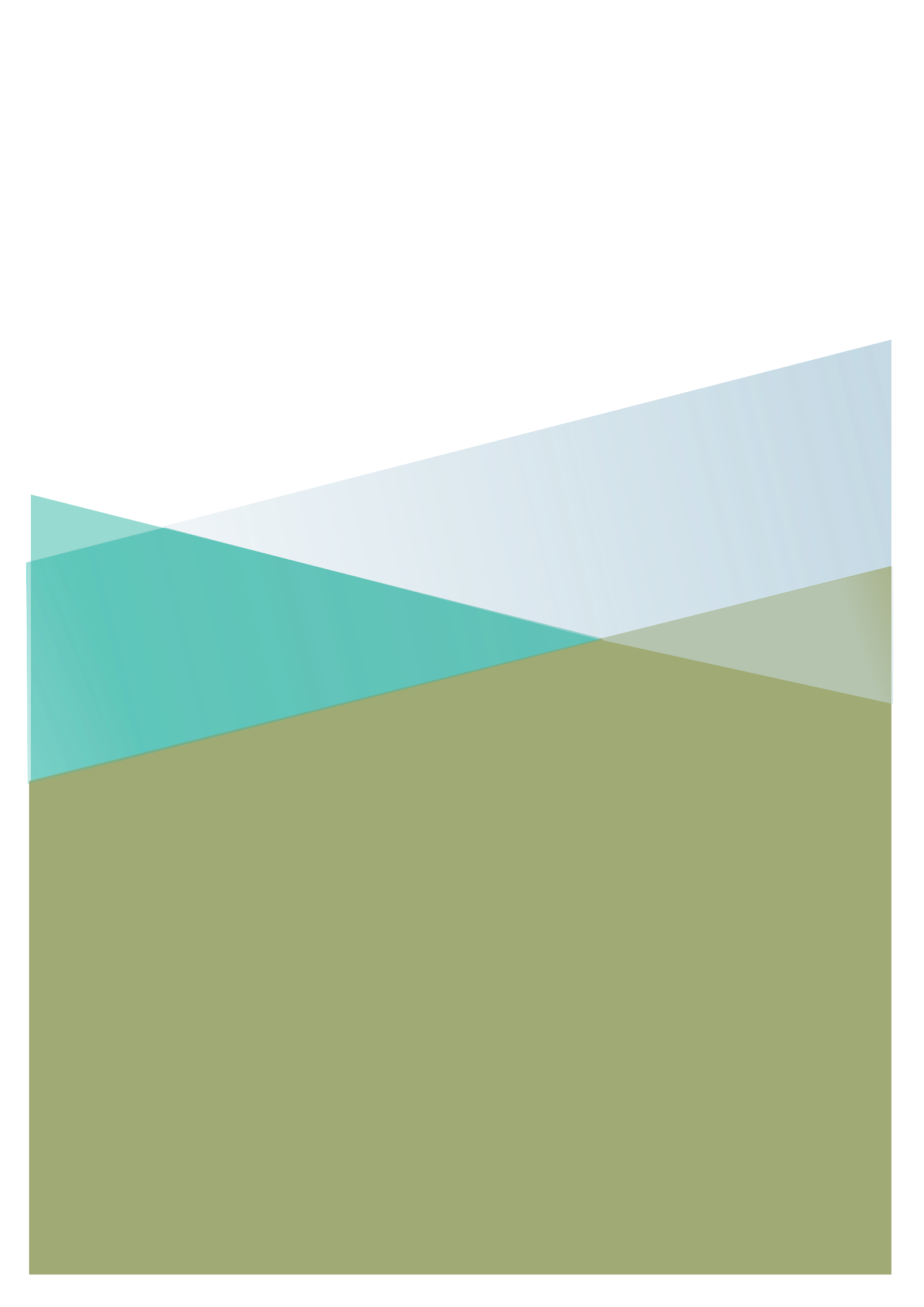
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**Wildlife Acts 1976 TO 2018 –   
Section 23(6) (d)**

**Application for a Licence to Retain an Injured or Disabled Protected Wild Animal**



Prepared by the Department of Housing, Local Government and Heritage

[**npws.ie**](https://www.npws.ie/)

* **This application to be completed by an applicant who is seeking a licence to retain an injured or disabled protected Wild Animal**
* Please use **legible BLOCK LETTERS** and answer **ALL** questions.
* **To avoid unnecessary delay** in processing your application, please ensure that you have **fully completed this form and that you have included a current email address.**

**Please return your completed forms by email or post:**

**Email:** [wildlifelicence@housing.gov.ie](mailto:wildlifelicence@housing.gov.ie)

**Post:** Wildlife Licensing Unit

National Parks and Wildlife Service

Department of Housing, Local Government and Heritage

90 North King Street

Smithfield

Dublin 7, D07 N7CV

**Privacy Statement**

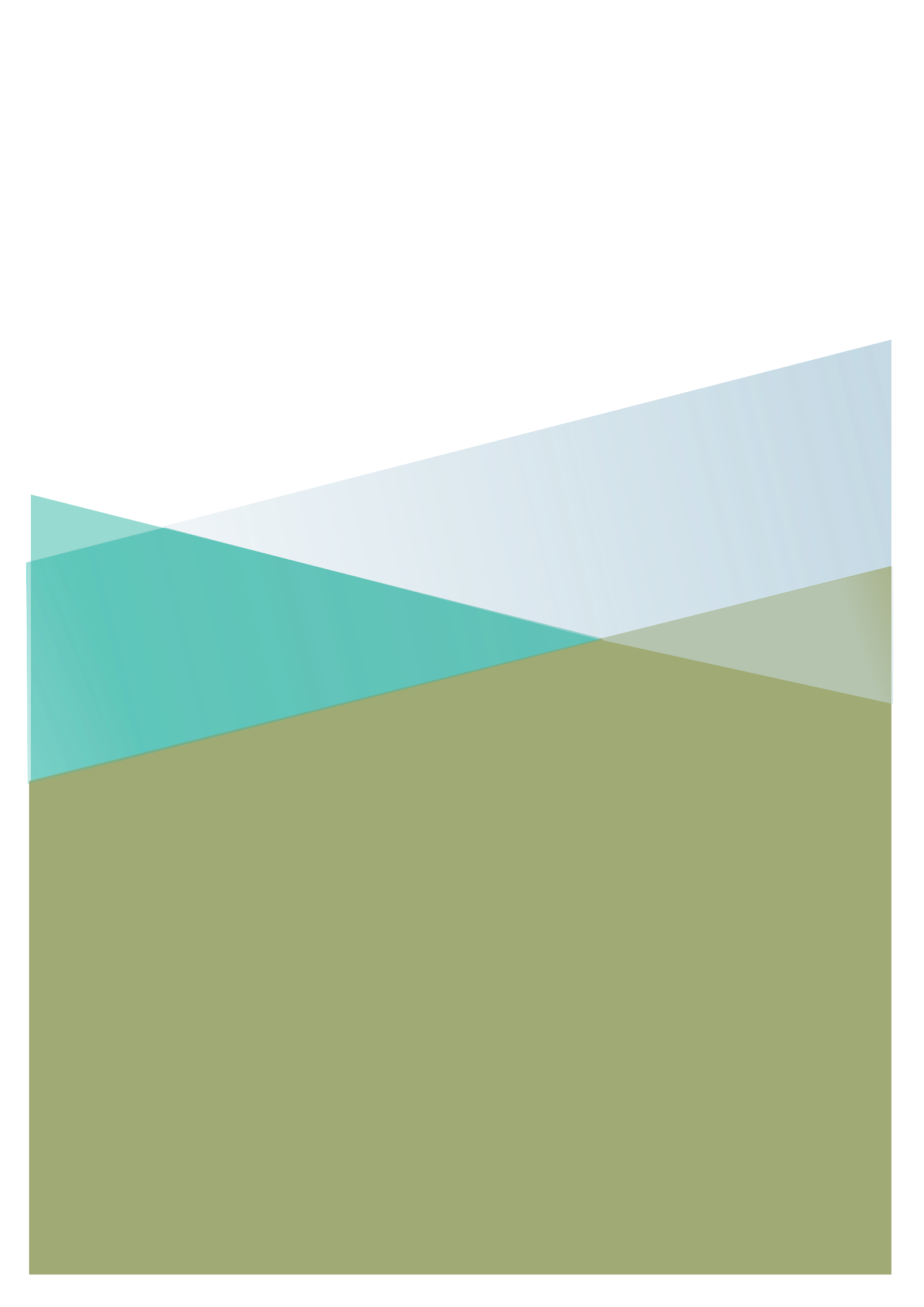
Please note that under Data Protection legislation Department staff may only discuss licence applications with the applicant, and not with any third party. See Privacy Statement at [www.npws.ie/licences](http://www.npws.ie/licences)

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| --- | --- | --- |
| 1. **Personal Details** | | |
| **Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | |
| **Address Line 1** |  | |
| **Address Line 2** |  | |
| **Address Line 3** |  | |
| **County** |  | |
| **Eircode** |  | |
| **Daytime Phone No.** |  | |
| **Email Address** |  | |
| **Part 2: Details of Animal:** | | |
| **Species:** | | |
| **Age: (If Known):** | | |
| **Gender:** | | |
| **Name and Address of Person who found the bird:** | |  |
|  |
|  |
|  |
| **Location and Date Found:** | | |
| **Possession Licence No:** | | |
| **Description of Injuries** | | |
| **Was the animal examined by a Vet?**  **If not, please give reasons as to why it has not been examined** | | Yes No |
| **Veterinarian’s Name and Address of Practice** | |  |
|  |
|  |
| **Outcome of Examination** | |  |
|  |
|  |

|  |  |
| --- | --- |
| **Should the Animal be Euthanised?** | Yes No |
| **If No – Why (Please provide details as to why the Animal should be retained)** |  |
| **Veterinarian’s Signature** |  |

**Before a licence can be issued – a Veterinary examination must take place to certify that the animal is incapable of being returned to the wild following rehabilitation.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Part 3: CITES Information** | | | | |
| **Is the Animal on the CITES Annexes or on any of the Annexes to the Birds and Natural Habitats Regulations?** | **ID Number**  **(Microchip or other identifier)** | | **CITES Appendix, EC Annex or BNH Regulations Annex** | **Species Name** |
| **Yes\_\_\_\_\_ No\_\_\_\_\_** |  | |  |  |
| **Part 4: Further Details on Retaining Animal** | | | | |
| **Details on why the animal cannot be returned to the Wild (**Please provide details (Including Veterinarian’s Report) | | | | |
| **Holding Facility Location and Details** | | | | |
| **Will this specimen be used commercially for breeding or display?** | | **Yes No** | | |
| **Details of Breeding, Research or Educational Project** | |  | | |
| **Part 5: Declaration** | | | | |
| I declare that all of the foregoing particulars are, to the best of my knowledge and belief, true and correct.  **Signature Of Applicant:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_ / \_\_\_ / \_\_\_\_\_\_  Any person who, for the purposes of obtaining a licence under the Wildlife Acts 1976 to 2018 makes any statement or gives information which they know to be false shall be guilty of an offence. | | | | |

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Department of Housing, Local Government and Heritage