Application for Protected Animals Rescue Permit

*Note: this application form should only be used if you are unable to apply online*

Forms can be mailed to:

Fauna Permits Unit
GPO Box 1782
Adelaide SA 5001

or lodge it in person at one of our offices:

Ground Floor, 81-95 Waymouth Street Adelaide

11 Helen Street Mount Gambier

9 Mackay Street Port Augusta

3 Wade Street Berri

86 Tasman Terrace Port Lincoln

*Before you begin*

This permit authorises the holder to take from the wild one or more injured, sick or orphaned protected animal for the purpose of short term rehabilitation and release.

A Protected Animals Rescue Permit is not required if you are the holder of a Wildlife Carer or Wildlife Rehabilitation Facility Permit that is endorsed for the species you are rescuing.

Please note this is a short term (one month) permit. By the end of that period, the animal(s) will either be released, deemed unfit for release, or may have died. One Basic animal can be held without a permit, but two or more Basic, or any Specialist species can only be held under an appropriate permit.

### Before you begin, please familiarise yourself with the ‘Protected Animals Rescue Permit Information You Need to Know‘ document which summarises your regulatory obligations. If you are under 18 years, your parent or guardian must make a declaration on your behalf. There is no charge for this permit.

*Previous Offences*

Have you ever been convicted of an offence against the *National Parks and Wildlife Act 1972*, the *Animal Welfare Act 1985*, or similar legislation in another Australian State/Territory or overseas?

⃝ Yes

⃝ No

If you selected ‘Yes’, you may proceed with this application and have it assessed. We may be in contact with you for further information. This can take up to 5 business days.

*Personal Details*

Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Middle name(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Family name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Residential address

Address Line 1 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address Line 2 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Suburb \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Postcode \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Postal Address

⃝ Select if as above, or provide details

Address Line 1 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address Line 2 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Suburb \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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*Add animals to application*

For what species are you applying for a rescue permit?

|  |  |  |
| --- | --- | --- |
| Common Name | Scientific Name | Species Code |
|  |  |  |
|  |  |  |

*Address where animals will be held (licenced premises)*

Animals will be kept at:

⃝ My residential address

⃝ Other address (please specify)

 Address Line 1 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Address Line 2 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please describe why the animal was rescued, location and date of rescue (eg describe injuries, that it was orphaned, etc)

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Has the animal received vet treatment?

⃝ Yes

⃝ No

If Yes, please provide information on the treatment that has provided. You may also attach a copy of the vet report.

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If No, please explain why the animal has not received veterinary care and provide information on the treatment that has been provided.

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Are you a member of a rescue organisation?

⃝ Yes

⃝ No

If Yes, please provide the name of the organisation

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Do you currently hold a permit with endorsement to keep this species under another permit type? (for example a Specialist Keep and Sell Permit (Hobbyist/Recreational), Wildlife Displayer Permit, etc)

⃝ Yes

⃝ No

If Yes, please provide your permit number

*(Note: you will not need to address the Assessment Criteria on Keeping, only the question about Release)*

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*Assessment - Keeping*

Describe your understanding of the husbandry requirements of the species you rescued (including diet, details of enclosures, hygiene, behavioural enrichment, ability to identify, prevent and treat illness, etc) *(attach additional pages if required).*

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Describe your experience in the rescue, rehabilitation and release of native wildlife relevant to this application.

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Please attach photos of your enclosure(s) to your application.

*Assessment – Release*

Describe your plan for how you will release the animal(s) (including location and habitat of release, checks you have in place to ensure that the animal(s) is free from disease, in good health and independent, the steps you will take to prevent injury or predation from other animals and how you intend to monitor the animal to ensure release has been successful).

* *Please note rescued Kangaroos must be kept in permanent captivity and carers will require a ‘Retain Protected Animals Unfit for Release Permit’*

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*Declaration*

* I have read and understand the requirements described in the ‘Protected Animals Rescue Permit Information You Need to Know‘ document which summarises the regulatory requirements I must comply with
* I declare that the information stated within this application is true and correct
* I understand that this permit is not transferable
* I acknowledge that the information I have provided may be used in accordance with the Government of South Australia’s Information Privacy Principles Instruction
* I have read and understand the outline of responsibilities below
* I understand this application must be supported by my parent or guardian, if I am under 18 years of age

**Our responsibilities**

* The information required on this form is collected under the *National Parks and Wildlife Act 1972*. We collect this information to determine your eligibility for a permit, to issue the related permit and for compliance activities. Your personal information will not be disclosed to a third party except in accordance with the ‘Information Privacy Principles’. Information held by the department may be used by law enforcement agencies, as well as other uses provided for by law. Such access for approved purposes may be granted to other government agencies. When you complete this application form, understand that you have consented to the release of information provided by you, to other agencies for compliance and enforcement purposes.

*If you are 18 or over*

I agree with the above declaration

Applicant full name ­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date ­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature ­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*If you are under 18*

As parent/guardian of the applicant, I agree with the above declaration

Applicant full name ­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian full name ­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian date of birth ­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date ­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent/Guardian ­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_