



FAUNA PERMITS APPLICATION FORM

Application to HUNT (TAKE) GALAHS AND / OR LITTLE CORELLAS BY TRAPPING

Issued pursuant to Section 68 (a), National Parks and Wildlife Act, 1972

YOU MUST COMPLETE THE SECTIONS BELOW AND SIGN THIS FORM IN THE SPACE PROVIDED

Title: Mr / Mrs / Ms (please circle) Other (Specify please) Permit renewal Yes [] No []
Surname: _____ Given Name(s): _____ Date of Birth: _____
Residential Address: _____ Suburb: _____ Post code: _____
Postal Address: _____ Suburb: _____ Post Code: _____
Phone No. (Home): _____ (Business Phone): _____ (Mobile): _____
E-mail: _____ (Home Fax): _____ (Business Fax): _____
Current "Keep and Sell" Permit number: _____ Permit Class: _____ Expiry date: _____

Permits to take Galahs and Little Corellas are only valid for use on those properties specified on the permit

Note: The maximum number of birds approved on the permit is 150 birds.

- 1. Number of Galahs you wish to take: _____ Number of Little Corellas you wish to take: _____
2. If a Permit is granted, from which properties will you be taking the birds from?

Location 1

Property Name: _____
Hundred of _____ Section Number(s) _____
Hundred of _____ Section Number(s) _____
Owners name _____ Managers name _____
Telephone No: (Home) _____ (Business) _____ (Mobile) _____

Location 2

Property Name: _____
Hundred of _____ Section Number(s) _____
Hundred of _____ Section Number(s) _____
Owners name _____ Managers name _____
Telephone No: (Home) _____ (Business) _____ (Mobile) _____

If there is insufficient space above to provide the details of ALL the properties for which you want this permit to cover, then please provide those details on a separate SIGNED and DATED sheet.

- 3. By what method(s) do you propose to take and transport these animals? (Please include photos of transport container/carrying cages).

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4. Vehicle registration number(s) of vehicle(s) to be used:

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5. If persons, other than yourself, will take these birds, list them below: *(supply full name, address, telephone number, date of birth and vehicle registration number of the vehicle to be used).*

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6. Address where the birds will be kept prior to sale:

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7. **Supply photos of your enclosure(s).**

8. Please provide information to support your experience and knowledge in the husbandry of this species:

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9. Under Regulation 15 of the *Wildlife Regulations 2016* it is an offence to sell juvenile Galahs or Little Corellas which are too young to fly or to feed themselves. Do you agree to comply with Regulation 15 of the *Wildlife Regulations 2016* and will ensure that any animals sold are old enough to fly and to fend for themselves? Yes No

10. Have you ever been convicted of offences against the *National Parks and Wildlife Act 1972*, *Animal Welfare Act 1985* and/or interstate Fauna Conservation Acts? Yes No

- If yes, please provide details:

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I declare that I have the written permission of the landowner(s). This permission has been granted within six months of the date of this signed application.

Should this application be approved I further agree to comply with any terms or conditions attached to a permit (if granted) and that a breach of any condition may be prosecuted and/or may terminate that permit.

I declare that the above answers are true and that I am capable of feeding and caring for any birds for which a permit is granted.

Signature of Applicant: _____ Date: _____

PLEASE ALLOW 10 WORKING DAYS FOR THE PROCESSING OF THIS APPLICATION

FOR OFFICE USE ONLY

Application assessed by: Signature Date

Recommendation:
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Approved by (Delegate's Name): Signature Date

Comments:
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Permit No Class..... Date Issued Record Book No.....

PAYMENT OF FEES OPTIONS:

HUNT (TAKE) GALAHS AND / OR LITTLE CORELLAS BY TRAPPING

FEE: \$88.00

Payment method (please tick)

In person at DEWNR Office

Adelaide: Customer Service Centre
Ground Floor, 81-95 Waymouth Street

Mount Gambier: 11 Helen Street

Port Augusta: SGIC Building, 9 Mackay
Street

Berri: 3 Wade Street

Port Lincoln: 86 Tasman Terrace

Cheque/Money Order

Make out to: Department of
Environment, Water and
Natural Resources

Credit Card

For payment via Credit Card please
provide a contact phone number for
DEWNR staff to contact you:

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Send your application form and payment (if cheque/money order) to:

Mail: Fauna Permits Unit, GPO Box 1782, Adelaide SA 5001

Fax: (08) 8115 5594

Email: dewnrfaunapermitsunit@sa.gov.au

FAUNA PERMIT UNIT

Ground Floor,
81-95 Waymouth Street
ADELAIDE SA 5000
www.wildlifepermit.sa.gov.au

**OFFICE HOURS FOR
PERMITS**

MONDAY TO FRIDAY
9:00 AM TO 5:00 PM

POSTAL ADDRESS

GPO Box 1782
ADELAIDE SA 5001

Telephone (08) 8124 4972

Facsimile (08) 8115 5594

Email:

dewnrfaunapermitsunit@sa.gov.au

