

INSTRUCTIONS

## MARYLAND DEPARTMENT OF NATURAL RESOURCES

## **FISHERIES SERVICE**

## SCIENTIFIC COLLECTION PERMIT APPLICATION

A. FEE \$25.00. MAKE CHECK OR MONEY ORDER PAYABLE TO THE DEPARTMENT OF NATURAL RESOURCES.  B. COMPLETE ALL INFORMATION. PLEASE PRINT OR TYPE.  C. RETURN COMPLETED APPLICATION WITH CHECK OR MONEY ORDER TO RICHARD BOHN, PERMIT COORDINATOR, DNR FISHERIES SERVICE B-2, 580 TAYLOR AVENUE, ANNAPOLIS MD 21401.  D. QUESTIONS? CONTACT RICHARD BOHNBY PHONE (410) 260-8317, FAX (410) 260-8279, OR E-MAIL (RBOHN@DNR.STATE.MD.US)  E. TOLL FREE # IN MD 1-877-620-8DNR ext 8323, DNR TTY FOR THE DEAF (410) 260-8832, TOLL FREE TTY FOR THE DEAF: 1-800-735-2253.	
D. TOLETREE WIND 1677 VEV OD MCCK 0525, BIK 1111 OK THE BERT (110) 200 0032, TOLETREE 111 TOK THE BERT 1 000 750 2255.	
1. NAME AND TITLE OF PRINCIPAL OFFICER	2. PHONE - WORK
	E MAIL ADDRESS ( )
3. ORGANIZATION	E-MAIL ADDRESS (optional)
4. ADDRESS	5. COUNTY OF COLLECTIONS
6. PROJECT PROPOSAL (Reason for study, objectives, justification, species, numbers, etc.) Use additional sheets if necessary.	
c. Thorse in the same, colour co, justification, species, numbers, co.)	
7. SPECIFIC LOCATION WHERE COLLECTION ACTIVITY WILL OCCUR	
7. SELECTIVE ECCENTION WILE COLLECTION ACTIVITY WILL OCCUR	
8. SAMPLING GEAR TO BE USED	
9. LIST OF COLLECTORS IN ADDITION TO APPLICANT	
<u>Name</u> <u>Address</u>	<u>Title</u>
10. I HEREBY APPLY FOR THE ABOVE PERMIT AND CERTIFY THAT THE INFORMATION HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.	
SIGNATURE OF APPLICANT	DATE