**Parks and Wildlife Division**

Level 4, Goyder Centre

25 Chung Wah Terrace

Palmerston NT 0830

**Postal address**

PO Box 496

PALMERSTON NT 0831

**T** 08 8999 4486

**F** 08 8999 4524

**E** pwpermits@nt.gov.au

APPLICATION FOR A WILDLIFE CARER’S PERMIT

***Territory Parks and Wildlife Conservation Act 1976***

* Please refer to the available resources for Wildlife care available at <https://nt.gov.au/environment/animals/wildlife-permits/apply-for-a-wildlife-carers-permit>  
  or contact Wildlife Operations:
  + Darwin region: 08 8995 5037
  + Katherine region: 08 8973 8888
  + Alice Springs region: 08 8951 8283
  + or [wildlife.management@nt.gov.au](mailto:wildlife.management@nt.gov.au)

This form is to be used to apply for a Wildlife Carers Permit. Information requested will enable your application to be processed as prescribed by the *Territory Parks and Wildlife Conservation Act 1976*.

**Please note the following:**

* Proof of identification may be required when applying for a permit.
* Facilities may be inspected by a conservation officer prior to the issuing of a permit.
* Any intentionally misleading or false statements made on this application may result in legal action.
* Your application must be assessed and a permit granted prior to caring for Protected Wildlife.
* Applicants will be assessed on previous experience, qualifications, provision of a mentor, facilities and resources.
* A permit application may be refused if the applicant does not satisfy the requirements.
* The permit holder may care and rehabilitate sick, injured and orphaned wildlife only. Once approved this permit does not give permission for the applicant to keep wildlife on a permanent basis.
* The permit holder is subject to the Northern Territory’s *Animal Welfare Act 1999*. Failure to comply may result in prosecution under this law – for further details please go to [www.animalwelfare.nt.gov.au](http://www.animalwelfare.nt.gov.au).
* All permit holders are required to keep reports for each animal under their care. Prior to release, permit holders must submit and have approved a Release Protected Wildlife Form (Carer).

**APPLICANT DETAILS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Surname:** | **Given Name/s:** | | | **Title:** |
| **Residential Address (not PO box):** | | | **DOB / /** | |
| **Postal Address:** | | **Mobile:** | | |
| **Telephone (business hours):** | | **Telephone (after hours):** | | |
| **Email:** | | | | |

The Department of Environment Parks and Water Security adheres to the Northern Territory Government Privacy Statement, which can be found at: <https://depws.nt.gov.au/consultation-publications/privacy-policy>

**PREVIOUS EXPERIENCE AND QUALIFICATIONS**

1. **Have you previously held this type of permit?**

🞏 No 🞏 Yes ⮚ Please provide Permit Number: ………………

1. **Have you previously held this type of permit in another state?**

🞏 No 🞏 Yes ⮚ Please provide: State: …………………… Permit Number: ………………

1. **Please detail prior experience:**

* Length of Experience:
* Species Cared For:
* Rehabilitation Stage of Species:
* Ability to Handle Wildlife:
* Wildlife Identification Skills:
* Knowledge of Wildlife Biology and Ecology:

**Please detail any relevant qualifications or training courses you have attended and when (please provide copies of certificates):**

**SUPPORT**

1. **Are you a member of any related organisations?**

🞏 No

🞏 Yes ⮚ Name of organisation/s:

1. **Do you have a mentor?**

🞏 No

🞏 Yes ⮚ Mentor to complete section below:

|  |  |  |  |
| --- | --- | --- | --- |
| **Mentor Surname:** | **Mentor Given Name/s:** | | **Mentor Permit No.** |
| **Telephone (business hours):** | | **Telephone (after hours):** | |

1. **Please detail prior experience:**

* Length of Experience:
* Species Cared For:
* Rehabilitation Stage of Species:
* Ability to Handle Wildlife:
* Wildlife Identification Skills:
* Knowledge of Wildlife Biology and Ecology:

**Please detail any relevant qualifications or training courses you have attended and when (please provide copies of certificates):**

Signature of Mentor: Date:…..…./………../ 20…….

**SPECIES**

1. **Please indicate which species group you are applying to care for:**

|  |  |  |  |
| --- | --- | --- | --- |
| **SPECIES GROUP** | **STAGE OF REHABILITATION (SELECT MULTIPLE IF APPLICABLE)** | | |
| **INTENSIVE CARE** (dependant young, illness or injury requiring intensive care) | **INTERMEDIATE CARE** (pre-weaned juveniles, recovery from illness or injury) | **PRE-RELEASE** (development of skills necessary for survival upon release) |
| MACROPODS (KANGAROOS, WALLABIES) |  |  |  |
| POSSUMS AND GLIDERS |  |  |  |
| OTHER MAMMALS (NATIVE RODENTS, QUOLLS, BANDICOOTS) |  |  |  |
| BATS (FLYING FOXES AND MICROBATS) ***LYSSAVIRUS VACCINATION REQUIRED*** |  |  |  |
| BIRDS (EXCLUDING RAPTORS) |  |  |  |
| RAPTORS |  |  |  |
| REPTILES (EXCLUDING VENOMOUS SNAKES) |  |  |  |
| AMPHIBIANS |  |  |  |

1. **Please provide all relevant vaccination details including dates:**

**FACILITIES AND RESOURCES**

1. **Please detail your facilities to care for wildlife and provide photos:**

* Enclosures (measurements):
* Yards (measurements):
* Predator proofing:
* Weather proofing:
* Quarantine:
* Separation from domestic animals:

**DECLARATION**

Section 114 of the *Territory Parks and Wildlife Conservation Act 1976* provides for a penalty of up to two (2) years imprisonment for a person, or up to 500 penalty points for a body corporate, making a false or misleading statement in connection with a matter under this Act.

1. **Within the last five years have you been convicted of a wildlife offence or had a permit cancelled under the *Territory Parks and Wildlife Conservation Act 1976*?**

**🞎 No**

**🞎 Yes ⮚** Provide details:

1. **Within the last five years have you been convicted of a wildlife offence or had a permit cancelled under similar interstate legislation?**

**🞎 No**

**🞎 Yes ⮚** Provide details:

1. **Do you want your contact details distributed to local vets and other carers?**

**🞎 No**

**🞎 Yes**

1. **Is this a renewal?**

**🞎 No**

**🞎 Yes ⮚** Please attach your Return Form

**Privacy**

Parks and Wildlife Commission respects and is committed to safeguarding the confidentiality and privacy of the information that it collects and handles, in accordance with the [*Northern Territory Information Act 2002*](https://legislation.nt.gov.au/en/Legislation/INFORMATION-ACT-2002).

You have been asked to provide personal information as part of your application to obtain a permit.

You do not have to provide your personal information but if you choose not to, the department may be unable to accept or process your application, or your application may be refused.

We will only use personal information supplied by you to provide a department service or program. We may share your information:

1. with Land Councils, park or reserve management boards or committees and other government departments regarding your application
2. if required or authorised by law to do so
3. if you have given us your consent to share your personal information for a specific purpose.

Find out more about how we handle your personal information by reading our [privacy policy](https://depws.nt.gov.au/consultation-publications/privacy-policy).[2]

I hereby apply for a permit issued under the provisions of the *Territory Parks and Wildlife Conservation Act 1976* and certify that the information supplied is true and accurate to the best of my belief, and hereby declare I shall not sell or otherwise dispose of the said fauna without the prior consent of the Director of Parks and Wildlife.

In accordance with section 55(2)(b) of the *Territory Parks and Wildlife Conservation Act* 1976, the Director may request additional information from the Applicant, that will be considered as prescribed information.

**Applicants**

Signature: …………………………………………………………… Date: ……. / ……. / …………

Name: ……………………………………………………………