



Florida Department of Agriculture and Consumer Services
Division of Agricultural Environmental Services

**LIMITED CERTIFICATION FOR COMMERCIAL
WILDLIFE MANAGEMENT**

ADAM H. PUTNAM
COMMISSIONER

Rule 5E-14.117, F.A.C.
Telephone: (850) 617-7997

Remit Fee Online at:
www.FreshFromFlorida.com

- or -

Check or Money Order Payable to
FDACS:

Revenue Processing Section
407 S. Calhoun Street, Room 121
Tallahassee, FL 32399-0800

IMPORTANT - DIRECTIONS:

- (1) Applicant must be 18 years of age or older to apply.
- (2) Attach a current, clearly recognizable, full-face, head-and-shoulders, photograph measuring approximately 1 1/2 x 1 1/2 inches in size, even if already on file.
- (3) Enclose a check or money order payable to DACS in the amount of \$150.00. **DO NOT SEND CASH. PLEASE REMIT SEPARATE CHECKS FOR EACH APPLICATION.**

I hereby make application for the Limited Commercial Wildlife Management examination.

**ATTACH RECENT
1 1/2 x 1 1/2 INCH
CLEAR, FULL-FACE
PHOTO HERE
EVEN IF ALREADY
ON FILE
DO NOT STAPLE**

Limited Certification for Commercial Wildlife Management - 001137	\$ 150.00
TOTAL FEES ENCLOSED	\$ _____

All questions **MUST** be answered. PLEASE PRINT.

1. Name of Applicant _____
(Last) (First) (Middle)

Mailing Address _____
(Street or Post Office Box)

Telephone Number _____
(City) (County) (State) (Zip Code)
(Area Code)

2. Name of Employer _____

Address _____
(Street) (City) (County) (State) (Zip Code)

Employer Phone No. _____
(Area Code)

3. Have you previously been examined and failed in the category now applied for? YES NO

If yes, give month and year FIRST examined in category: _____
(Month) (Year)

Date of Birth: _____
(Month) (Day) (Year)

4 Digit PIN#

County to be examined in: _____

(Applicant's Signature)

Org. Code: 42 13 08 02 060
EO B7
Object Code: 001137 \$ 150.00