

FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION DIVISION OF LAW ENFORCEMENT



CAPTIVE WILDLIFE CRITICAL INCIDENT/DISASTER PLAN

PAI	RT A: Complete	and submit	with initial o	r renewai a	ipplication to	or license/p	permit.	Please	Print.		
l.	Applicant or Lice Name:						Phone:	()	-	
	Business Name:						Phone:				
	Mailing Address:										
	g										
		City			State	Zip Code					
II.	Facility Informat Facility Address:										
		City			State	Zip Co	de	GPS	S Coordina	tes	-
	Flood Zone:	☐ Yes	☐ No								
III.	Emergency Conf	act: (Perso	n not living	at facility lo	ocation)						
	Name:						Phone:	_()	=	
	Business Name:						Phone:	_()	-	
	Mailing Address:										
		City			State	Zip Code					
IV.	Veterinarian Con	tact Inform	ation:								
	Veterinarian:										
	Name:			-	_)		
	Business Name:						Phone:	_()		
	Mailing Address:										
		City			State	Zip Code					
		_									
hous infor	tify that as part of the ed or maintained. F mation indicates a de acility.	urthermore s	aid information	will be made	e available for	inspection u	ıpon requ	uest of c	ommission	n personne	el. Said
Nam	e (Print)			Signature					Date		

Emergency Plan	(Attach additional sheets as necessary)
	in the event of an emergency (natural disaster, fire, etc.) and critical incident:

A. Chemical Capture Equipment		(<u>) Not Applicable</u>				
Emergency Contact Information:						
Name:			Phone: ()		
Address:			Phone: _()		
City	State	Zip Code				
B. Physical Capture Equipment	(nets, catch	poles, gloves, l	hooks, tongs, etc.)			
i .						
Emergency Contact Information:						
			Phone: (
Name:				}		
Name: Address:						
Emergency Contact Information: Name: Address:	State	Zip Code				
Name: Address:						
Name: Address: City						
Name: Address: City						
Name: Address: City						
Name: Address: City						
Name: Address: City						
Name: Address: City						
Name: Address: City C. Transport Cages and Vehicles			Phone: _{)		
Name: Address: City	State	Zip Code)		

III. Facility Information Checklist (Attach photo or drawing depiction of the facility lay out to indicate the following)						
Site plan of facility Location of access points to facility if access is controlled by fences, gates, etc. Location of area(s) where captive wildlife is kept Location of supplies (food, medicines, capture equipment, etc.) Location of each electricity and gas shutoff switch/valve						
IV. Miscellaneous Emergency Supply	IV. Miscellaneous Emergency Supply Checklist					
☐ Food ☐ Generator(s)	☐ Water ☐ Ice	☐ Medical Supplies☐ Misc. Supplies				
Location of storage and/or contact inform	ation for obtaining supplies					

V. Current Animal Inventory (Attached)

	The second secon
Northwest Region	North Central Region
3911 Hwy. 2321	3377 E. US Highway 90
Panama City, FL 32409-1658	Lake City, FL 32055-8795
(850) 265-3676	(386) 758-0525
24-Hour Law Enforcement:	24-Hour Law Enforcement:
(850) 245-7710	386-758-0529
Northeast Region	Southwest Region
1239 S.W. 10th Street	3900 Drane Field Road
Ocala, FL 34474-2797	Lakeland, FL 33811-1299
(352) 732-1225	(863) 648-3203
24-Hour Law Enforcement:	24-Hour Law Enforcement:
352-732-1228	863-648-3200
South Region	Monroe and Collier County
8535 Northlake Boulevard	24-Hour Law Enforcement:
West Palm Beach, FL 33412	305-289-2320
(561) 625-5122	
24-Hour Law Enforcement:	
561-625-5122	

State Warning Point	Florida Department of Agriculture and Consumer Services
Emergency: 1-800-320-0519 or 850-413-9911	Division of Animal Industry
Non Emergency: 850-413-9900	850-410-0900
www.floridadisaster.org	www.flsart.org



PERMIT APPLICATION GRANDFATHERED PROHIBITED SPECIES FOR PERSONAL USE CONDITIONAL/PROHIBITED/NONNATIVE SPECIES FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION

Division of Habitat and Species Conservation, Wildlife Impact Management 620 South Meridian Street, Tallahassee, Florida 32399-1600
NonnativePermitApps@MyFWC.com

(Please Print or Type)				
Applicant Name:		Date of Birth:		
Physical Address:				
City:	State:	County:	Zip:	
Mailing Address:				
City:	State:	County:	Zip:	
Primary Phone Number: Secondary Phone Number:				
Email Address:				
Applicant Signature:			Date:	
	te to the best of my know this application prior to t t herein may subject me	ledge and belief. I hereby swe their listing as a Prohibited sp to criminal penalties. Finally	ear and affirm that I was in lawful	
Section 1: Application Type				
New application				
Renewal application				

Section 2: Disaster and Critical Incident Plan

Applicants for permits to possess Prohibited species for personal use are required to document and submit a course of action to be taken in preparation for disasters or critical incidents. This plan must be documented on the Captive Wildlife Critical Incident/Disaster Plan from FWCDLE_619 (06/09). This form is available online at www.flrules.org or by submitted a request to the Florida Fish and Wildlife Conservation Commission, Division of Habitat and Species Conservation, 620 South Meridian Street, Tallahassee, Florida 32399-1600. This form must be completed and submitted upon permit application.

Section 3: Inventory

See http://myfwc.com/wildlifehabitats/nonnatives/conditional-prohibited-species/ for a list of Prohibited species.

In accordance with Rule 68-5.007, Florida Administrative (F.A.C.), certain species may be permitted for personal use. Permits may only be issued for animals possessed as a personal pet prior to their listing as Prohibited.

List common name, scientific name, and PIT tag number for each animal (one per line).

Species Common and Scientific Name	PIT Tag Number

Attach additional sheets as necessary.

Submit Completed applications to: FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION

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