

MARINE TURTLE PERMIT APPLICATION FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION DIVISION OF HABITAT AND SPECIES CONSERVATION

19100 SE Federal Highway, Tequesta, Florida 33469

Ph: 561-575-5407 • Fax: 561-743-6228

Complete all information that is applicable to your permit request. If additional space is required other than what is provided on the form, you may provide additional attachments as long as they are clearly marked and identifiable. Applications will not be evaluated until all requested information and reporting documentation required by previously held permits has been submitted.

(Please Print or Type) A. GENERAL APPLICANT INFORMATION

Name:		Date of Birth:	//	_
Affiliation:				_
Mailing Address:				_
City:	Sta	ate: Zip:		_
County:				
Phone Number: (Email Address:		Alt. Phone Num	nber: ()	-
This application is Previous Marine T	s for a(n): New Per Furtle Permit Number:		val 🗌 Amendment To Existing	Permit
I authorize FW information and fin		ondence regarding the by either e-mail or e	is box: nis application, including requests for a express delivery. Future agency action	
plea entered, of any 597.004, F.S.; Title similar laws or rules	y fisheries or wildlife violatio 5L-3.004, F.A.C.; rules of these in another jurisdiction)?	on (including a violat he Commission; 50 (] YES [] NO	n-criminal violation, regardless of adjution of Chapters 379, 370, 372, F.S.; S CFR Parts 622, 635, 640, 648, 654, 66 e county/state where the violation occu	Section 60, or 679;
•	a fisheries or wildlife related		or revoked? YES NO	
Applicant Signa	ature:		Date:]
supporting docum statement herein Federal, and loca felony charges and	ments is complete and accura a may subject me to crimina al laws. Any false statement nd will result in revocation of	tte to the best of my al penalties. I furthe ts or misrepresentat f this license. By sign	e information submitted in this appl knowledge and belief. I understand th er state that I will abide by all appli ions when applying for this license m ing this document, I also agree to com nd "U" of this application form.	at any false cable State, ay result in

B. ELIGIBILITY. A Marine Turtle Permit may be issued only to a properly accredited individual as defined below:

- (1) Students of colleges or universities whose studies with saltwater animals are under the direction of their teacher or professor.
- (2) Scientific or technical faculty of public or private colleges or universities.
- (3) Scientific or technical employees of private research institutions and consulting firms.
- (4) Scientific or technical employees of city, county, state, or federal research or regulatory agencies.
- (5) Members in good standing or recognized and properly chartered conservation organizations, the Audubon Society, or the Sierra Club.
- (6) Persons affiliated with aquarium facilities or museums, or contracted as an agent thereof, which are open to the public with or without an admission fee.
- (7) Persons without specific affiliations listed above, but who are recognized by the commission for their contributions to marine conservation such as scientific or technical publications, or through a history of cooperation with the commission in conservation programs such as turtle nesting surveys, or through advanced educational programs such as high school marine science centers.

Permits are issued to individuals and are not transferable. The Commission shall not issue permits to individuals unable to demonstrate a working knowledge of current marine turtle conservation practices, to individuals lacking specific experience in conducting marine turtle research or conservation activities, to individuals who do not meet the applicable criteria in 68E, F.A.C., or if there is no demonstrated need for the project.

<u>C. CONSERVATION & RESEARCH ACTIVITIES</u>. Please list all proposed activities. If you are applying for a new permit or amending a permit to include a new activity, for each proposed activity: (1) include a detailed description of qualifications and experience of the applicant relevant to the proposed activities; (2) explain the purpose, objectives, or justification for the activity; (3) detail the methodology (complete Section H and attach research proposal if appropriate); and (4) describe the benefits to the recovery of marine turtle populations in Florida.

D. NESTING SURVEY AREA. Identify the proposed nesting survey area. Include detailed area maps if this is an application for a new permit or an addition to a nesting area previously permitted. If activities are to be conducted within any state park, specify the park name(s) below.

County (ies):			
Beach Name(s):			
Northern/Western Boundary:			
Southern/Eastern Boundary:			
Exclusions (within N/W-S/E b	oundaries):		
Anticipated start date:	Ending date:	Anticipated number of s	survey days/week
Has FWC authorized you to co	nduct nesting surveys in t	this area in previous years?	YES NO

E. BEACH MONITORING PROJECTS. Please list each beach monitoring project (e.g., nourishment, renourishment, sand placement, dune reconstruction), including project name and DEP permit number, requested for authorization under this permit. Please note that all new beach monitoring requests must be reviewed and approved by FWC. **TITLE(S)**:

F. MECHANICAL BEACH CLEANING ACTIVITIES. Identify any areas within your survey area where mechanical beach cleaning takes place between March 1 and October 31.

County	Beach name (as it appears on your permit) and boundaries of beach cleaning activities	Name of Beach Cleaning Company	Contracted for Beach Cleaning Monitoring?
			🗌 YES 🗌 NO
			☐ YES ☐ NO

<u>**G. RESEARCH PROJECTS.</u>** Please list each research project requested for authorization under this permit. Please note that all new research requests must be accompanied by a detailed proposal (see FWC Sea Turtle Conservation Guidelines for appropriate proposal format). Include detailed area maps of project area if applicable. <u>**TITLE(S)**</u>:</u>

<u>H. OTHER AGENCY PERMITS</u>. Identify all permits required from other state or federal agencies for the proposed project(s). Indicate date the permit was acquired or application was submitted, and submit copies of those permits or applications in conjunction with this application form.

<u>I. REPORTING REQUIREMENTS</u>. Various conservation, research and monitoring activities require submission of an annual report detailing the activities conducted in association with the permitted activity. Permits will not be processed until all applicable reports are received. Check all appropriate boxes below.

Nesting Survey Reports	YES	Research Project	YES	Monitoring Project Report(s)	YES	Quarterly Holding Facility	YES
Submitted	N/A	Report(s) Submitted	N/A	Submitted	N/A	Reports Submitted	N/A
Tagging Program	YES	Turtle Walk Summary	YES	Hatchling Release Summary	YES	Trawl/Capture	YES
Report(s) Submitted	N/A	Report(s) Submitted	N/A	Report(s) Submitted	N/A	Report(s) Submitted	N/A

J. PERMIT COPIES.

Please be aware that all authorized personnel must have the original permit or a copy of the permit signed by both FWC and the Permit Holder (applicant) in his/her possession while conducting permitted authorized activities.

K. APPLICATION SUBMISSION.

Applications may be submitted electronically to the Marine Turtle Permit Coordinator (email to <u>MTP@MyFWC.com</u>), may be faxed to (561) 743-6228, or may be mailed to the following address:

FWC – Marine Turtle Permits 19100 SE Federal Highway Tequesta, FL 33469

Documents submitted separately from an application form must be marked (or files named) with the applicant's name and affiliation.

L. AUTHORIZED PERSONNEL. A Permit Holder may request that additional personnel be included on a permit. The Commission shall allow up to twenty-four (24) volunteers to conduct marine turtle conservation work under the supervision of the permit holder if requested. Please list below: (1) the full **legal** first name; (2) last name; (3) complete mailing address; and (4) telephone number for each individual. Please note that the Permit Holder is responsible for all activities conducted by persons authorized on the permit.

NAME		CONTACT INFORMATION Mailing Address Phone Number				
First	Last	Mailing Address	Phone Number			