



HUNT APPLICATION/PERMIT National Wildlife Refuge System



Sacramento National Wildlife Refuge Complex
752 Country Road 99W, Willows, CA 95988
Office (530) 934-2801
Email: sacramentovalleyrefuges@fws.gov

PERMIT (Refuge Use Only) **Sacramento River NWR – Mobility Impaired Blind Reservation Form for the Rio Vista Unit or the Sul Norte Unit**

Permit Number/Type: _____ Valid for Season: _____

Follow instructions in the refuge hunt publication; not all fields may be required. Read and comply with all refuge regulations, including application deadlines.

Please submit this form with your proof of disability via mail, or email (usually in-person submission is also available Monday – Friday 8:30am – 4:00pm, but offices are closed 2022-2023 due to building remodel) via the contact information at the top at least 3 days prior to the day you would like to hunt. A staff member will contact you via phone as soon as you have been approved with the gate combination. Proof of disability will not be retained and will be shredded upon your approved reservation.

Mobility Impaired Blind Reservation (requires refuge verify proof of disability): A mobility impaired hunter must provide proof of disability before using the blind. A mobility impaired hunter is defined as a person who has been issued one of the following:

- A Department of Motor Vehicles Mobility Impaired License Plate
- A Permanent Parking Placard Identification Card**
- A “Mobility Impaired Veteran” License Plate
- A valid “Mobility Impaired Persons Motor Vehicle Hunting License” (FG Form 1460).

***The blue plastic “Mobility Impaired Parking Placard” may not be substituted for the required identification which bears the name of the mobility impaired person. Mobility impaired hunters must provide the registration certificate for DMV issued mobility impaired license plates.*

Hunt Permit Application

Date of Application

License Type

Valid California hunting license, plus all applicable licenses, tags and validations for deer, wild pig, and/or turkey

State Issued Hunter Ident./License No.

Method (Check all that apply)

Shotgun Archery

Species Permit Type (Check all that apply)

Deer Turkey Wild Pig

Primary Hunter Contact Information

Full Legal Name

Check if Youth/Junior Hunter (Aged under 16 years)
Age at Time of Hunt (Youth Hunter Only)

Mailing Address

City

State

Zip Code

Daytime Phone (Incl. Area Code)

Cell Phone (Incl. Area Code)

Email Address

Names of Additional Party Members

1.

2.

3.

Parent/Guardian Contact Information (Required Only for Youth Hunters)

Full Legal Name of Parent/Guardian

Relationship to Youth
(Select One)

Description for “Other”

Hunter’s Mailing Address

City

State

Zip Code

Daytime Phone (Incl. Area Code)

Cell Phone (Incl. Area Code)

Email Address

Hunt Dates

I would like to use the Rio Vista blind on:

I would like to use the Sul Norte blind on:

Important Additional Information

Please read the rules and regulations below before signing.

- 1. I agree to stay on designated roads and only drive to the designated blind and parking area.*
- 2. I agree to enter the Rio Vista or Sul Norte Unit no earlier than 2 hours before sunrise and exit the property no later than 1 ½ hours after sunset.*
- 3. I agree that my hunting partner (if applicable) and I will only hunt from the designated blind and my partner will be with me at all times (except possibly retrieving the vehicle).*
- 4. I agree that I will not use this opportunity to gain access to other areas of the Refuge.*
- 5. I agree that I will only park in the designated location.*
- 6. I agree that I will only enter the Unit using the combination lock on the above date.*
- 7. I agree to follow all Refuge Specific Regulations and have read the Rio Vista or Sul Norte Unit brochure(s).*
- 8. I certify that I have all the necessary licenses, tags, and validations to hunt deer, turkey, or feral pig.*
- 9. I certify that I will remove all trash and hunting equipment when I leave.*
- 10. If I don't follow the above rules I will forfeit my opportunity to hunt the blind for at least 1 year.*

I have read and understand the refuge hunt regulations and agree to abide by the regulations governing hunting on the refuge.

Hunter Signature

Parent/Guardian Name (Printed)
(Required for hunters less than 16 years old)

Parent/Guardian Signature

FOR USFWS USE ONLY

Date Received: _____

Payment Exempt/No Fee

Notes:

NOTICES

All information you provide will be considered in reviewing this application. False, fictitious, or fraudulent statements or representations made in the application may be grounds for revocation of the permit and may be punishable by fine or imprisonment (18 U.S.C. 1001).

PRIVACY ACT STATEMENT

Authority: The information requested is authorized by the National Wildlife Refuge System Administration Act (16 U.S.C. 668dd-ee) as amended and the Refuge Recreation Act (16 U.S.C. 460k – 460k-4, 640K-3, & 664).

Purpose: The collection of personal information is to verify that an individual is eligible to receive a permit to conduct monitored activity on areas within the National Wildlife Refuge System, national fish hatcheries, and other conservation areas administered by the Secretary of the Interior for fish and wildlife purposes.

Routine Uses: The individual's information will be used to verify permit status, provide permittees with permit-related information, and monitor activities conducted under a permit. This information may be shared in accordance with the Privacy Act of 1974 and the routine uses listed in the System of Records Notices: FWS-5 National Wildlife Refuge Special Use Permits; FWS-21 Permits System; FWS-10 National Fish Hatchery Special Use Permits.

Disclosure: Providing the information is voluntary; however, as a requirement for maintaining a Federal permit under the National Wildlife Refuge System Administration Act, failure to disclose the requested information may be sufficient cause for revocation of the permit.

PAPERWORK REDUCTION ACT STATEMENT

We are collecting this information subject to the Paperwork Reduction Act (44 U.S.C. 3501 *et seq.*) to provide the refuge managers the information needed to decide whether or not to allow the requested use, and to respond to requests made under the Freedom of Information Act and the Privacy Act of 1974. The information that you provide is voluntary; however, submission of the requested information is required to evaluate the qualifications, determine eligibility, and document permit applicants. Failure to provide all required information is sufficient cause for the U.S. Fish and Wildlife Service to deny a permit. We may not conduct or sponsor and you are not required to respond to a collection of information unless it displays a currently valid OMB control number. OMB has approved this collection of information and assigned OMB Control No. 1018-0140.

ESTIMATED BURDEN STATEMENT

Public reporting for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Service Information Clearance Officer, U.S. Fish and Wildlife Service, 5275 Leesburg Pike, MS: PRB (JAO/3W), Falls Church, VA 22041-3803, or via email at Info_Coll@fws.gov. Please do not send your completed application to this address.

APPLICANT DOES NOT NEED TO PRINT OR RETURN THIS PAGE