



HUNT APPLICATION/PERMIT National Wildlife Refuge System



**Patuxent Research Refuge
North Tract**
230 Bald Eagle Drive, Laurel, MD 20724
Phone: (301) 497-5770
Website: <https://www.fws.gov/refuge/Patuxent/visit/hunting.html>

PERMIT (*Refuge Use Only*)

Permit Number/Type: _____ Valid for Season: 2024-2025

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

Lottery Application: Deadline- Lottery application due at same time of permit application

Hunt Permit Application

State Hunting License Number

Refuge Hunting Permit No.

Date of Application _____

Method (*Check all that apply*)

Species Permit Type (*Check all that apply*)

- Rifle Shotgun Archery Deer Turkey Migratory Bird Waterfowl
- Falconry Muzzleloader Primitive Youth Hunt Youth Turkey

Primary Hunter Contact Information

Check if Youth Hunter (*16 years old or younger*)
Age as of September 1, 2024 (*Youth Hunter Only*)

Full Legal Name _____

Mailing Address _____ City _____ State _____ Zip Code _____

Daytime Phone (Incl. Area Code) _____ Cell Phone (Incl. Area Code) _____ Email Address _____

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

Full Legal Name of Parent/Guardian _____ Relationship to Youth _____

Hunter's Mailing Address _____ City _____ State _____ Zip Code _____

Daytime Phone (Incl. Area Code) _____ Cell Phone (Incl. Area Code) _____ Email Address _____

Lottery Hunts

Select hunt(s) you would like to be entered in the lottery for:

Deer
11/16/2024- PM HUNT
<input type="checkbox"/> Shotgun
<input type="checkbox"/> Shotgun-Disabled
<input type="checkbox"/> Bow/ Crossbow

Deer
12/14/2024- AM HUNT
<input type="checkbox"/> Shotgun
<input type="checkbox"/> Shotgun-Disabled
<input type="checkbox"/> Bow/ Crossbow

Select Hunt(s) you wish to be entered into lottery for:

Adult- General- Turkey- North Tract (Mondays)
<input type="checkbox"/>

Adult- General- Turkey- South Tract (Saturdays)
<input type="checkbox"/>

Adult-Disabled- Turkey- North Tract (Mondays)
<input type="checkbox"/>

Youth- Turkey- North Tract (Saturdays)
<input type="checkbox"/>

APPLICANT MUST PRINT AND RETURN BOTH PAGES

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

Hunter Signature Parent/Guardian Name (Printed) Parent/Guardian Signature
(Required for hunters less than 17 years old)

FOR USFWS/MNHA USE ONLY

Date Received: _____ Payment Exempt/No Fee Payment Required Payment Amount: _____

Payment Type: Personal Check Cash Money Order Other:

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).

Purpose: The collection of contact information is to verify that the individual has an eligible permit to hunt on one of the National Wildlife Refuges that is designated for waterfowl hunting.

Routine Uses: The individual's contact information may be used to verify permit status, provide permittees with permit-related information, and monitor waterfowl hunt activities conducted under a permit. More information about routine uses can be found in the System of Records Notice, Permits System, FWS-21.

Disclosure: Providing the information is required as a condition of 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. If the information indicates a violation of a statute, regulation, rule, order or license, whether civil, criminal, or regulatory in nature, the information may be transferred to the appropriate Federal, State, local or foreign agency charged with investigating or prosecuting such violations.

PAPERWORK REDUCTION ACT STATEMENT

We are collecting this information subject to the Paperwork Reduction Act (44 U.S.C. 3501) 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: JAO/1N, Falls Church, VA 22041-3803, or via email at Info_Coll@fws.gov. Do not send your completed application to this address.

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