Form 3-200-18 (Rev. 02/2023) U.S. Department of the Interior

OMB Control No. 1018-0167 Expires 07/31/2026

|                               | Take of Gold<br>De<br>(Bald & Golden<br>U.S | WILDLIFE PERMIT APPLICATION FORM<br>den Eagle Nests During Resource<br>evelopment or Recovery<br>Eagle Protection Act, 50 CFR 22.75)<br>5. Fish and Wildlife Service<br>of Migratory Bird Management                                                                                             | FISH & WILDLIFE<br>SERVICE |
|-------------------------------|---------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|
| TYPE OF REQU                  | Application                                 | <b>BEFORE FILLING OUT THIS FORM,</b> please access<br>the <u>Return Addresses</u> (to obtain the email/postal<br>mail addresses where this form can be returned),<br>and read the <u>Frequently Asked Questions</u> ,<br><u>Instructions</u> , and <u>Additional Information</u> . Please retain | Alter or substitution      |
|                               | ndment                                      | the "NOTICES" page for your records.                                                                                                                                                                                                                                                             |                            |
| If requesting a renewal or an | endment, provide Permit #                   |                                                                                                                                                                                                                                                                                                  |                            |
| •                             |                                             | on. U.S. address may be required in Section C, see instruction<br>r application complete and bein avoid unnecessary delay                                                                                                                                                                        |                            |

| instruction page(s) for information of now to make your application complete and help avoid unnecessary delays. |                       |                                 |                             |             |  |
|-----------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------|-----------------------------|-------------|--|
| A. Complete if applying as an individual                                                                        |                       |                                 |                             |             |  |
| 1.a. Last name                                                                                                  |                       | 1.b. First name                 | 1.c. Middle name or initial | 1.d. Suffix |  |
| 2. Date of birth (mm/dd/yyyy)                                                                                   | 3.a. Telephone number | 3.b. Alternate telephone number | 3.d. E-mail address         |             |  |

| B. Complete if applying on behalf of a business, corporation, public agency, Tribe, or institution |                             |                            |                                                         |  |
|----------------------------------------------------------------------------------------------------|-----------------------------|----------------------------|---------------------------------------------------------|--|
| 1.a. Name of business, agency, Tribe, or institution                                               | 1.b. Doi                    | ing business as (dba)      |                                                         |  |
| 2. Tax identification no.                                                                          | 3. Description of busines   | ss, agency, or institutior | 1                                                       |  |
| 4.a. Principal officer Last name                                                                   | 4.b. Principal officer Firs | st name                    | 4.c. Principal officer Middle name/ initial 4.d. Suffix |  |
| 5. Principal officer title                                                                         |                             | 6. Primary contact         | name                                                    |  |
| 7.a. Business telephone number 7.b. Alternate telephone 7.b.                                       | none number 7.c. Bu         | isiness fax number         | 7.d. Business e-mail address                            |  |

| C. All applicants complete address information                                                                                                                                                                                                                                                                                                                                                                                                                  |                         |                              |                      |              |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------|----------------------|--------------|--|--|
| 1.a. Physical address (Street address; Apartment #, Suite #, or Room #; no P.O. Boxes)                                                                                                                                                                                                                                                                                                                                                                          |                         |                              |                      |              |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                         |                              |                      |              |  |  |
| 1.b. City                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 1.c. State              | 1.d. Zip code/Postal code:   | 1.e. County/Province | 1.f. Country |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                         |                              |                      |              |  |  |
| 2.a. Mailing Address (include if different th                                                                                                                                                                                                                                                                                                                                                                                                                   | an physical address; in | clude name of contact persor | n if applicable)     |              |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                         |                              |                      |              |  |  |
| 2.b. City                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 2.c. State              | 2.d. Zip code/Postal code:   | 2.e. County/Province | 2.f. Country |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                         |                              |                      |              |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                         |                              |                      |              |  |  |
| D.                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <u>A</u>                | Il applicants MUST co        | omplete              |              |  |  |
| 1. A <b>nonrefundable processing fee</b> is required to process this permit, please attach check or money order payable to the U.S. FISH AND WILDLIFE SERVICE. Federal, Tribal, State, and local government agencies, and those acting on behalf of such agencies, are exempt from the processing fee – Please see <i>details regarding fee exempt status as outlined in</i> 50 CFR 13.11(d). See important permit details including regulations and fee amount |                         |                              |                      |              |  |  |
| <ul> <li>2. Do you currently have or have you ever had any Federal Fish and Wildlife permits?</li> <li>Yes No If yes, list the number of the most current permit you have held or that you are applying to renew/re-issue:</li> </ul>                                                                                                                                                                                                                           |                         |                              |                      |              |  |  |
| 3. Certification: I hereby certify that I have read and am familiar with the regulations contained in Title 50, Part 13 of the Code of Federal Regulations and                                                                                                                                                                                                                                                                                                  |                         |                              |                      |              |  |  |
| the other applicable parts in subchapter B of Chapter I of Title 50, and I certify that the information submitted in this application for a permit is complete and accurate to the best of my knowledge and belief. I understand that any false statement herein may subject me to the criminal penalties of 18 U.S.C. 1001.                                                                                                                                    |                         |                              |                      |              |  |  |
| accurate to the best of thy knowledge and belief. I understand that any laise statement herein may subject the to the chiminal penalties of 18 U.S.C. 1001.                                                                                                                                                                                                                                                                                                     |                         |                              |                      |              |  |  |

| Signature of applicant/Principal Officer | (No stamped signatures. | Electronic signatures accepted.) | Date of |
|------------------------------------------|-------------------------|----------------------------------|---------|



FEDERAL FISH AND WILDLIFE PERMIT APPLICATION FORM Take of Golden Eagle Nests During Resource Development or Recovery (Bald & Golden Eagle Protection Act, 50 CFR 22.75) U.S. Fish and Wildlife Service **Division of Migratory Bird Management** 



Note: A Federal permit to take golden eagle nests is available only to parties engaged in a resource development or recovery operation and only when nests are inactive. An inactive nest is one that is not currently used by golden eagles as determined by the absence of any adult, egg, or dependent young at the nest during the 10 days before the nest is taken. You must be at least 18 years old to apply for a migratory bird permit.

Please provide the information requested below. If additional information needs to be provided that does not fit in the designated spaces, add additional sheets to your application submission. You may use as many additional sheets as needed. Please number pages accordingly using the page number box provided at the bottom of the sheet, and the corresponding question number. You should be as thorough and specific as possible in your responses. Incomplete applications will be returned.

As the permittee, you are legally responsible for ensuring that your subpermittees, staff, and volunteers adhere to the terms of your permit.

FOR RENEWAL APPLICATIONS: Please answer all questions in Section E below in addition to filling out Sections A-D above. All information must be provided, required reporting must be up to date (use report form 3-202-16), and processing fees paid, or the renewal will not be processed.

# SECTION E.

## Questions

1) Attachments - In additions to this form, you should also attach the following to complete your application:

a) An appropriately scaled map or plat must be included which delineates the areas of the resource development or recovery operation and identifies the exact location of each golden eagle nest you propose to take in decimal degrees (e.g. 36.87998, -88.3435). The map or plat must contain enough detail so that each golden eagle nest proposed to be taken can be readily located by the Service. If you need assistance determining the latitude/longitude for a specific location in decimal degrees, you can use any of the "latitude and longitude finder" tools available online for this purpose.

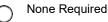
b) A map and digital photographs that show the location of the nest in relation to buildings, infrastructure, and human activities.

c) A map with the location of the property, including city, county and State

2) Any permit issued as a result of this application is not valid unless you also have any required State or tribal permits or approvals associated with the activity. Have you obtained all required State or tribal permits or approvals to conduct this activity?



Yes, Have Attached





Have Applied, Will Provide Upon Request

3) Describe the resource development or recovery operation in which you are engaged.

4) Indicate the number of golden eagle nests you propose to take and how they were determined to be inactive. Provide copies of the monitoring report(s) indicating nest is inactive.

5) Describe the property on which the taking is proposed, with reference made to its exact geographic location.

6) Describe each activity to be performed during the resource development or recovery operation that involves the taking of a golden eagle nest.

7) Indicate the length of time you need the permit to be valid, including the start and ending dates of the resource development or recovery operation. The permit cannot be valid for a tenure of longer than 2 years.

8) What is the intended disposition of each nest you propose to take? Are you willing to donate any nests for scientific or educational purposes?

9) Provide a statement indicating any proposed mitigation measures that are compatible with the resource development or recovery operation to encourage golden eagles to reoccupy the site. If the establishment of one or more nest sites is proposed, provide a description of the materials and methods to be used and the exact location of each artificial nest site. Mitigation measures may include reclaiming disturbed land to enhance golden eagle nesting and foraging habitat, relocating in suitable habitat any inactive golden eagle nest taken, or establishing one or more nest sites.

10) You must retain records legibly written or reproducible in English relating to the activities conducted under your permit for at least 5 years after the date of expiration of your permit. Is the physical address you provided in Section C on page 1 of this application the address where your records will be kept?

O Yes

No, If "No" provide the physical address

- 11) Disqualification factor. Have you, the permittee, or your client (if a broker on behalf of your client):
  - Been assessed a civil penalty or convicted of any criminal provision of any statue or regulation relating to the activity for which the application is filed (50 CFR 13.21(b) (1);
  - Been convicted, or entered a plea of guilty or nolo contendere, for a felony violation of the Lacey Act, the Migratory Bird Treaty Act, or the Bald and Golden Eagle Protection Act. (50 CFR 13.21 (c)(1)):
  - Had a permit revoked within the last five years for willfully violating any Federal or State statute or regulation, or any Indian tribal law or regulation, or any law or regulation of any foreign country, which involves a violation of the conditions of the permit or of the laws or regulations governing the permitted activity (50 CFR 13.28 (a)(1)) or failing to correct deficiencies that were the cause of a permit suspension within 60 days (50 CFR 13.28 (a)(2)).

Answer "yes" if ANY of the events listed immediately above have occurred. Answer "no" if none of the events listed immediately above have occurred.

Ves

If you answered "Yes", provide: a) the individual's name; b) date of conviction, civil penalty assessment or revocation; c) charge(s), or reason(s) for revocation; d) location of the incident; e) court (if applicable, ticket, federal/state/tribal court etc.); and f) legal action taken for each violation (i.e. fine, incarceration, probation...). Please be aware that a "Yes" response does not automatically disqualify you from getting a permit.

12) Are you eligible for Fee Exempt Status? Fee exempt status applies to government agencies (Federal, State, Tribal, and municipal governments). Applicants acting on behalf of such agencies must submit a letter on agency letterhead and signed by the head of the unit of government for which the applicant is acting on behalf, confirming that the applicant will be carrying out the permitted activity for the agency, or the agencies tax exempt form.

Yes - Government Agency

Yes - Acting on behalf of Government Agency Documentation Included

No - not eligible for Fee Exempt Status

13) I acknowledge that I have read the <u>Instructions</u>, <u>FAQ</u>, and <u>Additional Information</u>; and have accessed the page with the <u>Return Addresses</u> to obtain the address where I should return this form. I have also filled out all fields and questions in this application. Check this box to acknowledge:

### NOTICES

#### PRIVACY ACT STATEMENT

Authority: The information requested is authorized by the following: the Bald and Golden Eagle Protection Act (16 U.S.C. 668), 50 CFR 22; the Endangered Species Act (16 U.S.C. 1531-1544), 50 CFR 17; the Migratory Bird Treaty Act (16 U.S.C. 703-712), 50 CFR 21; the Wild Bird Conservation Act (16 U.S.C. 4901-4916), 50 CFR 15; the Lacey Act: Injurious Wildlife (18 U.S.C. 42), 50 CFR 16; Convention on International Trade in Endangered Species of Wild Fauna and Flora (TIAS 8249), 50 CFR 23; General Provisions, 50 CFR 10; General Permit Procedures, 50 CFR 13; and Wildlife Provisions (Import/export/transport), 50 CFR 14.

**Purpose:** The collection of contact information is to verify the individual has an eligible permit to conduct activities that affect protected species. The information the individual provides helps the FWS monitor and report on protected species and assess the impact of permitted activities on the conservation and management of species and their habitats.

**Routine Uses:** The collected information may be used to verify an applicant's eligibility for a permit to conduct activities with protected wildlife; to provide the public and the permittees with permit related information; to monitor activities under a permit; to analyze data and produce reports to monitor the use of protected wildlife; to assess the impact of permitted activities on the conservation and management of protected species and their habitats; and to evaluate the effectiveness of the permit programs. More information about routine uses can be found in the System of Records Notice, Permits System, FWS-21.

**Disclosure:** The information requested in this form is voluntary. However, submission of requested information is required to process applications for permits authorized under the listed authorities. Failure to provide the requested information may be sufficient cause for the U.S. Fish & Wildlife Service to deny the request.

#### PAPERWORK REDUCTION ACT STATEMENT

In accordance with the Paperwork Reduction Act (44 U.S.C. 3501), the U.S. Fish and Wildlife Service collects information necessary to monitor take and disposition of migratory birds, under the applicable laws governing the requested activity, for which a permit is requested, and to respond to requests made under the Freedom of Information Act and the Privacy Act of 1974. Information requested in this form is purely voluntary. However, submission of requested information is required in order to process applications for permits authorized under the above laws. Failure to provide all requested information may be sufficient cause for the U.S. Fish and Wildlife Service to deny the request. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor and a person is 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 Control No. 1018-0167.

#### ESTIMATED BURDEN STATEMENT

We estimate public reporting for this collection of information averages:

Original submission - paper-based: 9 hours (reporting) and 1 hour (recordkeeping) Original submission - electronic: 7 hours (reporting) and 1 hour (recordkeeping)

These estimates include time for reviewing instructions, gathering and maintaining data and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of the form to the Service Information Clearance Officer, Fish and Wildlife Service, U.S. Department of the Interior, 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 form to this address.

#### FREEDOM OF INFORMATION ACT

For organizations, businesses, or individuals operating as a business (i.e., permittees not covered by the Privacy Act), we request that you identify any information that should be considered privileged and confidential business information to allow the Service to meet its responsibilities under FOIA. Confidential business information must be clearly marked "Business Confidential" at the top of the letter or page and each succeeding page and must be accompanied by a non-confidential summary of the confidential information. The non-confidential summary and remaining documents may be made available to the public under FOIA [43 CFR 2.26 – 2.33].