| CHECK ONE: | |
|--|----------|
| COMMERCIAL NWCO LICENSE (FEE: \$250.00 - | 2 YEARS) |
| NON-COMMERCIAL (MUNICIPAL LICENSE) NO | CHARGE |

APPLICATION - NUISANCE WILDLIFE CONTROL OPERATOR (NWCO) LICENSE

If you are willing to aid the Department of Energy and Environmental Protection and property owners in the control of nuisance wildlife species authorized under Section 26-47, please complete the following. **Note: Non-residents from states that prohibit**Connecticut residents from being licensed as Nuisance Wildlife Control Operators (NWCO) in that state are prohibited from obtaining a Connecticut NWCO license.

| NAME | | | |
|---|--|-----------------------------------|--------------------|
| (Include both y | our name and business or municipality n | name if applicable) | |
| ADDRESS | TOWN | STATE | ZIP |
| (Use | business or municipality address if app | licable) | |
| RESIDENT ADDRESS | | | |
| (Resident address informa | ation must also be provided for complian | nce with state licensing laws) | |
| TELEPHONE NUMBER | EMAIL | | |
| TELEPHONE NUMBER(Use business number i | f applicable) | | |
| EYES SEX HAIR W | EIGHT HEIGHT I | DATE OF BIRTH// | _ |
| NWCO CERTIFICATE NUMBER (same as NV | VCO license number): N | | |
| Do you wish to be included in our NWCO Direct | ctory for nuisance wildlife referrals i | n your town or area?YES | NO |
| If yes, which town do you wish to be listed in?_ | ((| only one town may be selected) | |
| If you have previously been certified to trap bea | ver as a NWCO, do you wish to con | ntinue?YESNO | |
| Have you ever been arrested for a fish or gam | ne violation?YESNC |) | |
| If yes, please state nature and time of violation:_ | | | |
| NOTE A PROJECT TO | | | |
| NOTE: APPLICATION WILL BE RETURN | ED IF ALL INFORMATION RE | QUESTED IS NOT PROVIDE | D. |
| Prior to submitting this application, the following | g must be completed or included: | | |
| Complete a DEEP approved Nuisance Pass the State NWCO Exam and rece (i.e. N0500) | | | cate number |
| 3. Complete and sign application (Must 4. Include a \$250.00 check or money or 5. Mail to: NWCO Program, CT DEEP | der payable to CT DEEP - Munica | | the licensing fee. |
| Any person making a written false statement on General Statutes as amended. | this form shall be subject to arrest a | s provided in Section 53A-157 or | the Connecticut |
| "I declare, under penalties of false statement, the knowledge and belief." | at the submitted information is true, | accurate and complete to the best | of my |
| Applicant's Signature | | Date | |
| | | | |