



MARYLAND DEPARTMENT OF NATURAL RESOURCES  
WILDLIFE AND HERITAGE SERVICE

**APPLICATION FOR WATERFOWL OUTFITTER PERMIT/LICENSE**

**INSTRUCTIONS**

- A. THIS IS AN APPLICATION FOR A WILDLIFE PERMIT/LICENSE. COMPLETE ALL THE INFORMATION IN PARTS 1-17.
- B. RETURN WITH FEE TO PERMITS COORDINATOR, WILDLIFE AND HERITAGE SERVICE, 580 TAYLOR AVE. M E-1, ANNAPOLIS MD 21401. MAKE CHECKS PAYABLE TO THE "DEPARTMENT OF NATURAL RESOURCES."

**CURRENT INFORMATION**

1. NAME

2. NAME OF BUSINESS (IF APPLICABLE)

3. STREET

4. CITY/STATE/ZIP

5. COUNTY

6. E-MAIL ADDRESS

7. WEBSITE LINK

8. PHONE = HOME

9. PHONE - WORK

10. DATE OF BIRTH

11. NAME AND TITLE OF PRINCIPAL OFFICER (IF #2 IS A BUSINESS)

12. SOCIAL SECURITY OR FEDERAL TAX ID

13. NEW PERMIT/LICENSE WILL EXPIRE ON JULY 31<sup>ST</sup> FOLLOWING THE DATE OF ISSUANCE.

FEE: \$300.00

14. COMPLETE THE FOLLOWING:

COMPLETE AND RETURN THE ATTACHED AFFIDAVIT.

IF YOU AGREE TO HAVE YOUR NAME, ADDRESS AND TELEPHONE NUMBER RELEASED BY THE DEPARTMENT TO INDIVIDUALS REQUESTING SUCH INFORMATION OR TO APPEAR ON THE DEPARTMENT'S LIST OF WATERFOWL OUTFITTERS PLEASE CHECK \_\_\_\_\_ YES OR \_\_\_\_\_ NO.

15. CHECK ONE OF THE FOLLOWING TO COMPLY WITH MARYLAND'S WORKMEN COMPENSATION ACT (ARTICLE 1-401).

I AM:

\_\_\_ SUPPLYING DNR WITH A CERTIFICATE OF INSURANCE.

\_\_\_ SUPPLYING DNR WITH INSURANCE BINDER NUMBER \_\_\_\_\_

\_\_\_ SELF-EMPLOYED OR EMPLOY ONLY FAMILY MEMBERS, AND THEREFORE I AM NOT REQUIRED TO COMPLY WITH THIS

LAW.

16. EXPERIENCE: A PERSON APPLYING FOR A WATERFOWL OUTFITTER LICENSE MUST HAVE BEEN: A) PREVIOUSLY LICENSED BY THE WILDLIFE AND HERITAGE SERVICE AS A MASTER HUNTING GUIDE (PRIOR TO APRIL 11, 2005) OR B) HAVE AT LEAST 20 DAYS OF EXPERIENCE PER SEASON FOR TWO SEASONS PERFORMING THE DUTIES OF A WATERFOWL HUNTING GUIDE.

PLEASE DOCUMENT YOUR SOURCE OF EXPERIENCE.

A) IF YOU WERE PREVIOUSLY LICENSED BY THE WILDLIFE AND HERITAGE SERVICE AS A MASTER HUNTING GUIDE, PROVIDE THE LAST YEAR DURING WHICH YOU WERE LICENSED AS A MASTER HUNTING GUIDE AND YOUR MASTER HUNTING GUIDE LICENSE NUMBER (IF POSSIBLE).

YEAR YOU WERE LAST LICENSED AS A MASTER HUNTING GUIDE: \_\_\_\_\_

MASTER HUNTING GUIDE LICENSE NUMBER: \_\_\_\_\_

OR B) YOU MAY DOCUMENT THE DATES AND A DESCRIPTION OF THE DUTIES YOU PERFORMED IN THE SPACE PROVIDED BELOW. YOU MUST ALSO ATTACH A SIGNED LETTER FROM THE MANAGER/PROPIETOR OF THE OUTFITTING SERVICE, GUIDE SERVICE, OR OTHER WATERFOWL HUNTING OPERATION FOR WHOM YOU PERFORMED THE DUTIES OF A WATERFOWL HUNTING GUIDE. THE LETTER MUST INCLUDE A BRIEF DESCRIPTION OF YOUR DUTIES AND DATES OF SERVICE AND THE NAME, ADDRESS, AND PHONE NUMBER OF THE HUNTING OPERATION FOR WHOM YOU PERFORMED THE DUTIES OF A WATERFOWL HUNTING GUIDE.

17. I HEREBY APPLY FOR THE ABOVE PERMIT/LICENSE AND CERTIFY UNDER PENALTY OF PERJURY THAT THE INFORMATION HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SIGNATURE OF APPLICANT

DATE

QUESTIONS? CONTACT PERMITS COORDINATOR, WILDLIFE AND HERITAGE SERVICE, TAWES STATE OFFICE BLDG., ANNAPOLIS, MD 21401; (410) 260-8540