

VIRGINIA DEPARTMENT OF WILDLIFE RESOURCES  
PASSAGE PEREGRINE FALCON PERMIT APPLICATION  
Under State Authority of §29.1-412, §29.1-419, Code of Virginia, 4 VAC 15-250  
**Application must be received by August 31, 2026**

Send application to:  
Attn. Shirl Dressler, Virginia Department of Wildlife Resources  
7870 Villa Park Drive, P.O. Box 3337, Henrico, VA 23228-0778  
shirl.dressler@dwr.virginia.gov

DWR or State Permit No: \_\_\_\_\_ USFWS Permit No(s): \_\_\_\_\_

Applicant's Full Name: \_\_\_\_\_  
(First) (Middle) (Last)

Sex: M F (Circle One)

Address: \_\_\_\_\_

\_\_\_\_\_ County: \_\_\_\_\_

Home Phone Number: (\_\_\_\_) \_\_\_\_\_ Work Phone Number: (\_\_\_\_) \_\_\_\_\_

Mobile Phone Number: (\_\_\_\_) \_\_\_\_\_ E-mail address: \_\_\_\_\_

Address where peregrine falcon will be sheltered: \_\_\_\_\_

\_\_\_\_\_

How many years have you practiced falconry? \_\_\_\_\_

With what species have you practiced falconry? \_\_\_\_\_

Do you have experience trapping raptors? If yes, what species have you captured and what methods were used? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Where do you plan to attempt to capture a passage peregrine falcon? \_\_\_\_\_

\_\_\_\_\_

Class of Permit: General \_\_\_\_ Master \_\_\_\_

**PLEASE FILL-OUT BACK OF APPLICATION ALSO**

Please provide the following information for each of the falconry raptors in your possession at the present time:

|    | <i>Species</i> |   | <i>Band Number</i> |   | <i>Band Type and Color</i> |
|----|----------------|---|--------------------|---|----------------------------|
| 1. | _____          | - | _____              | - | _____                      |
| 2. | _____          | - | _____              | - | _____                      |
| 3. | _____          | - | _____              | - | _____                      |

|    | <i>Age</i> |   | <i>Sex</i> |   | <i>Date of Acquisition</i> |   | <i>Source of Birds</i> |
|----|------------|---|------------|---|----------------------------|---|------------------------|
| 1. | _____      | - | _____      | - | _____                      | - | _____                  |
| 2. | _____      | - | _____      | - | _____                      | - | _____                  |
| 3. | _____      | - | _____      | - | _____                      | - | _____                  |

#### **CERTIFICATION**

I hereby certify that I have read and am familiar with applicable State and Federal regulations, and I further certify that the information submitted in this application for a passage peregrine falcon 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 outlined in State and Federal law.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## FEDERAL NOTICE

In accordance with the Privacy Act of 1974 (PL 93-579), please be advised that:

1. The gathering of information on fish and wildlife is authorized by :
  - (a) Bald Eagle Protection Act (16 U.S.C. 663a)
  - (b) Endangered Species Act of 1973 (16 U.S.C. 1539)
  - (c) Migratory Bird Treaty Act (16 U.S.C. 703-711)
  - (d) Lacey Act (18 U.S.C. 42 and 44)
  - (e) Tariff Classification Act of 1962 (19 U.S.C. 1202) and
  - (f) Title 50, Part 13, of the Code of Federal Regulations
2. The disclosure of the requested information is required in order to process federal applications for licenses or permits authorized under the above acts. With the exception of your social security number, failure to disclose all of the information may be sufficient cause for the U.S. Fish and Wildlife Service to deny you a permit.
3. In the event there is indicated a violation of a statute, regulation, rule, order, or license, whether civil, criminal, or regulatory in nature, the requested information may be transferred to the appropriate Federal, State, local, or foreign agency charged with investigating or prosecuting such violations.
4. In the event of litigation involving the records or the subject matter of the records, the requested information may be transferred to the U.S. Department of Justice.