



IOWA DEPARTMENT OF NATURAL RESOURCES

Licensing Section

6200 Park Ave Ste 200, Des Moines, IA 50321

Phone: (515) 725-8200 www.iowadnr.gov

CASHIER'S USE ONLY

0233-542-0092-MG-0642

Business Name

Full Name

NUISANCE WILDLIFE CONTROL OPERATOR PERMIT APPLICATION

APPLICANT INFORMATION:

Full Name:

Last

First

Middle

Address:

Address

City

State

Zip Code

Phone Number:

Birth Date:

Years of Trapping Experience:

Business Name:

Business Address if different from above:

Business Phone if different from above:

Email Address:

Website:

I would like my business to be posted on the DNR Website Yes No

Signature of Applicant:

Date:

Conservation Officer Signature:

Date:

OFFICE USE ONLY

Test Score #1:

Date of Test:

Officer Initials:

Test Score #2:

Date of Test:

Officer Initials:

If test failed: Explain timetable for re-testing

Send to Karmin Klingenberg at Central Office:

Completed application

Signed copy of "Terms of Permit"

Completed test with score

\$25.00 Administration Fee

Multiple offender file checked:

Date:

Officer Initials: