



**CLASS II WILDLIFE REHABILITATION PERMIT RENEWAL APPLICATION**

**In order to be eligible for a Class II permit, an applicant must either be a licensed veterinarian or shall submit a letter of support signed by the applicant's Class II sponsor certifying that the applicant has met the 200 hour requirement in Fis 812.01(b)(2)b.1**

(Please print or type)

**Name:** \_\_\_\_\_

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

**Phone#:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Date**

**LICENSED CONSULTING VETERINARIAN**

**Name:** \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

**Telephone:** \_\_\_\_\_

\_\_\_\_\_  
**Veterinarian's Signature**

**Pursuant to Fis 812.01(h), the following affidavit must be signed to authorize the rehabilitation of Rabies Vector Species. ("Rabies Vector Species" means raccoons, woodchucks, fox, skunks or bats.)**

**INDEMNIFICATION STATEMENT**

**I hereby agree to indemnify the New Hampshire Fish and Game Department from all losses, injury and damage to persons or property resulting from acts or omissions on my part, and assume full liability and responsibility for myself and my assistants in the care of and contact with Rabies Vector Species (raccoons, woodchucks, fox, skunks and bats)**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**