

## MS Department of Wildlife, Fisheries, & Parks

South Regional Office 1201 N. Clark Avenue Magnolia, MS 39652 (601) 783-2911 Phone (601) 783-2926 Fax

## **TAXIDERMIST APPLICATION**

Name:	DOB:		
Home/Cell Phone:			
Address:			
Stree		State	Zip
Driver's License #/State:	Social Se	ecurity #:	
l,		the und	ersigned
residing at the above address, her			-
listed species of wild birds and/or	,	a permit to possess to	ine ronowing
The particular purpose for which s	uch animals and/or birds	to be possessed are:	
-			
Number and Species of wild birds	and/or wild animal in no	ssession:	
Trumber and Species of Wild Birds	and or who animar in po.	336331011.	
I am am not employed	• •	•	
institution. If so, where			
Please attach a certified check, me	oney order or draft in th	e amount of \$12.29	
I certify that the above answers a	•	•	e to comply
with all the provisions of the Miss			
and regulations pertaining thereto		, manne, i isneries, and	Turks laws
Cianahuma of Assaltanah		Date	
Signature of Applicant		Date	