

Date received _____

Permit Number _____

COLVILLE CONFEDERATED TRIBES
Fish and Wildlife Permit (CCT FW 4.1.300A)
Importation of Animals to the Colville Reservation

Type of importation: Commercial ☐ Domestic ☐

1. Operator Name: _____ Phone Number: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

2. Physical location (Please attach map and photo of location of site where animals/fish will be kept):

Address: _____

City: _____ State: _____ Zip: _____

Section _____ Township _____ Range _____

3. Scientific and common name of animal to be Imported: _____ Origin: _____

4. Number of Animals to be imported: _____

5. Permit start date: _____ Projected import date: _____

(Permit is valid for 30 days of permit start date)

6. Animal Identification (mark or tag): _____

*(Please list all location of all marks and/or tags, if additional space is needed list on separate page and attach to Permit Application)*7. Was an Annual Production Plan submitted? Yes ☐ No ☐8. Intent of Importation: Release ☐ Possession ☐ Sale ☐

9. Please attach Health Certificate or proof animals are disease free from DVM or Fish Health Specialist

10. If applicant is requesting importation of fish or eggs, identify ploidy level: 2n ☐ 3n ☐

Level of Success: _____ % (Attach documentation of level and success)

It is unlawful to transport animals, onto the Colville Reservation without a permit issued by the CCT Fish and Wildlife Director. By submitting this permit application I agree to obey all Tribal and relevant federal laws and regulations and consent to the jurisdiction of the Colville Tribal Court as the forum for resolution of any civil disputes arising from the activities described herein. Failure to comply with the terms of this permit may result in civil penalties and/or other remedies described in Colville Law and Order Code §§ 4-8-10 *et seq.* This permit is a legal document of the Confederated Tribes of the Colville Reservation and does not ensure compliance with any state or federal laws. The permittee is responsible for ensuring that their actions are in compliance with federal and state law and should contact appropriate state or federal entities if they have any questions regarding compliance with state or federal law. If 5% or more variance in quantity is projected, submittal of a new importation permit is required.

Applicant Signature: _____ Date: _____

(Please submit a check or money order payable to Colville Tribes Fish and Wildlife Department for the assessed processing fee with each permit application. A permit is required for each shipment; multiple annual shipments require submittal of Annual Production Plan (CCT FW 4.1.300B) 60-days prior to submitting permit application.)

Applications and processing fees can be submitted by mail to the Colville Confederated Tribes Fish and Wildlife Department, Attn: Animal Importation Permit Processing, P.O. Box 150, Nespelem, WA 99155 or in person at the F&W Department, Second Floor West of the Colville Government Building at 21 Colville Street, Nespelem, WA 99155.

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INFORMATION BELOW COMPLETED BY CCT F&W PERSONNEL

Route to:

Anadromous Division Program Manager ☐
Resident Fish Division Program Manager ☐
Wildlife Division Program Manager ☐

Conditions of Permit: _____

Recommend Approval ☐ Recommend Denied ☐

Signature Division Program Manager (Or Designee) Date

Director Fish and Wildlife Department Date
(Or Designee)