Mail Report To: State of Wisconsin Department of Natural Resources Bureau of Customer Service and Licensing

Bureau of Customer Service and Licensing PO Box 7924, Madison WI 53707-7924 Form 9400-579A (R 2/05)

Due: On or before January 30 each year

Notice: This form is authorized by s. 169.36(10)(b), Wis. Stats., and may be used by any person who holds a license issued under ch. 169, Wis. Stats., which authorizes the holder to possess live captive wild animals, including the holder of a Wild Fur Farm License. Submittal of an annual report to the Department is mandatory and must be submitted on or before January 30 following the license year that the report covers. Failure to submit a complete annual report to the Department may result in a maximum forfeiture of \$200 plus costs and assessments. Extra forms are available or this form may be photocopied if needed. A license holder may use their own annual report form or document (such as a computer-generated record), provided it includes all the information asked for below. Personal information collected will be used for program administration and enforcement purposes and may be made available to requesters as required by Wisconsin's Open Records law [ss. 19.31-19.39, Wis. Stats.].

License Type: (Select the license type this report covers – One license per report)						License Number	
Captive Wild Animal Farm License	Wild Fur Farm License		Non-Profit Educational Exhibitors License				
Scientific Research License	Bird Dog Training License		Bird Dog Trial License			Report Year	
Hound Dog Training License	Hound Dog Trial License		Dog Club Training License				
Licensee Last Name	First Name		MI	MI Daytime Telephone Number E-ma		ail Address	
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Street Address City		County		·	State ZIP Code		
Species	Total Number Possessed at Start of Year	Total Number Propagated	Total Number Purchased or Acquired	Total Number Sold or Transferred	Total Number that Died or were Killed	Total Number Escaped	Total Number Possessed at End of Year
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I hereby certify the foregoing information is true and correct. I understand that providing incorrect information may result in revocation of my license and possible penalties.

Signature of Licensee

Date Signed