



# MASSACHUSETTS RESEARCH/EDUCATION COLLECTION PERMIT APPLICATION

Taxonomic Group(s) of Organisms to be Captured, Handled, Possessed, or Collected (check all that apply)

☐ Mammals      ☐ Fish      ☐ Reptiles      ☐ Amphibians  
☐ Birds      ☐ Plants      ☐ Invertebrates I  
(Dragonflies/Damselflies/Mussels/  
Crustaceans/Snails/Sponges/Worms)      ☐ Invertebrates II  
(Beetles/Butterflies/Moths/Bees)

If this application is for birds, do you have a Migratory Bird Permit? ☐ Y ☐ N      If yes, Permit #: \_\_\_\_\_

## Applicant/Prospective Permit Holder Information

First & Last Name	Organization	Date of Birth
Street Address	City/Town	State
Email	Telephone	Zip Code
		Previous Permit # (if applicable)

Project Title or Name: \_\_\_\_\_

## Project Proposal

Have you attached a project proposal containing complete details regarding:

- |                                                                                                 |                                                          |
|-------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| A. Project title or name, and date of the proposal?                                             | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| B. Statement of need and specific project objectives?                                           | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| C. Species to be sampled or collected?                                                          | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| D. Specific location(s) of sampling/collecting?                                                 | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| E. Number(s) of individuals to be sampled or collected, and justification?                      | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| F. Method(s)/technique(s) of sampling/collecting?                                               | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| G. Seasonal schedule for sampling/collecting?                                                   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| H. Disposition of sampled/collected individuals?                                                | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| I. Expected total duration of the project (in years)?                                           | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| J. Expected benefit(s) of the project?                                                          | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| K. Names, ages, and qualifications of the prospective Permittee and all proposed Subpermittees? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Please refer to the corresponding Guidelines for Proposals document on the MassWildlife website at:

<https://www.mass.gov/lists/natural-heritage-forms-and-guidelines>

**Required Signature:** I hereby certify under the pains and penalties of perjury that the information contained in this application (form and proposal) is true and complete to the best of my knowledge.

Signature of Applicant/Prospective Permit Holder

Date

The completed application and supporting proposal may be emailed to [natural.heritage@mass.gov](mailto:natural.heritage@mass.gov) or sent by mail, to:  
Scientific Collection Permits | MassWildlife Field Headquarters | 1 Rabbit Hill Road | Westborough, MA 01581

\*\*\*Failure to follow instructions or provide complete information may delay processing and review of the application\*\*\*

MASSWILDLIFE