State of California – Department of Fish and Wildlife
DREISSENID MUSSEL PERMIT APPLICATION
DFW 1014 (New 04/10/15) Page 1 of 3

☐ New ☐ Renewal ☐ Amendment

SECTION 1 – PERMITTEE INFORMATION

First Name	M.I.	Last Name	Previous Permit # (if applicable)

Affiliation	Title

Affiliation's Mailing Address	Day Telephone	Fax Number

City	State	Zip Code	Email Address

Will others be in possession of dreissenid mussels under this permit?
☐Yes ☐No If yes, list individuals below. *Attach additional page if necessary.*

Last Name, First Name	Day Telephone	Email Address

SECTION 2 – DREISSENID MUSSELS REQUESTED

Species	Lifestage	Number of Individuals or description of material (Enter "N/A" for none.)
Dreissena rostriformis bugensis (quagga mussel)	Adult	
Dreissena rostriformis bugensis (quagga mussel)	Veliger	
Dreissena polymorpha (zebra mussel)	Adult	
Dreissena polymorpha (zebra mussel)	Veliger	
Other Dreissenid Species:		

SECTION 3 – PURPOSE

(Describe how each species, lifestage, and quantity requested in Section 2 will be used. Attach additional pages if necessary.)

SECTION 4 – SOURCE OF MUSSELS			
Agency Name	City	State	Zip Code
Contact Name	Title		
Agency Address	Day Telephone	Fax Number	
City	State	Zip Code	Email Address
Describe how each species and lifestage of dreissenid mussels were killed and preserved. *Attach additional pages if necessary.*			

SECTION 5 – POSSESSION
Preservation - Describe how each species and lifestage were preserved (if different than described in Section 4).
Storage - Provide address where mussels will be held, stored, and/or disposed of.
Transport - If mussels will be transported under this permit describe the reason for transport, mode of transport, how they will be packed, and the destination(s).

SECTION 6 – OTHER PERMITS
Do you have other permits necessary to possess mussels? ☐ No ☐ Yes (If "Yes," attach copies to this application.)

APPLICATION CERTIFICATION
I understand that if I fail to provide all information, or check the boxes, my permit may be denied. I certify that I have read, understand, and agree to abide by, all conditions of this permit and attachments, the applicable provisions of the Fish and Game Code (FGC), and the regulations promulgated thereto. I certify that I am not currently under any California Department of Fish and Wildlife license or permit revocation or suspension, and that there are no other legal or administrative proceedings pending that would disqualify me from obtaining this permit. I agree that if I make any false statement as to any fact required as a prerequisite to the issuance of this permit, the permit is void and will be surrendered upon request, and I understand that I may be subject to prosecution pursuant to FGC Section 1054.

APPLICANT'S SIGNATURE X	DATE

For CDFW Use Only	Permit #	Valid from:	to:
Approved by:		Date:	

INSTRUCTIONS FOR COMPLETING THE DREISSENID MUSSEL PERMIT APPLICATION

Please read all instructions before completing the application and all applicable laws and regulations that pertain to dreissenid mussels (Fish and Game Code Sections 2301 and 2302, and Title 14, CCR Sections 671 and 672 *et seq.*).

A Dreissenid Mussel Permit is required for any person, or federal, state, or local agency, district, or authority that seeks to possess, import, ship or transport into the state or within its borders dead dreissenid mussels (*Dreissena rostriformis bugensis* (quagga mussel) and/or *Dreissena polymorpha* (zebra mussel). Live dreissenid mussels shall not be imported, shipped, or transported into the state under this permit.

A Dreissenid Mussel Permit does not authorize any person, or federal, state, or local agency, district, or authority to collect live or dead dreissenid mussels in California. A Scientific Collecting Permit and/or a Restricted Species Permit are required for the collection of mussels. Information about Scientific Collecting Permits and Restricted Species Permits can be found at www.dfg.ca.gov/licensing/specialpermits/.

INSTRUCTIONS FOR COMPLETING THIS PERMIT APPLICATION

1. It is mandatory to provide responses on all fields on the application. If field is not applicable respond “NA.” Incomplete applications will be returned and could delay the issuance of your permit.
2. Attach complete copies of appropriate federal, state and/or local permits if applicable.
3. Sign and date the application.
4. Submit the complete, signed application and attachments via email to Invasives@wildlife.ca.gov, or by mail to: Department of Fish and Wildlife, Invasive Species Program, 1416 Ninth Street, Sacramento, CA 95814.

IMPORTANT! Please allow 30 business days to process all applications.

For additional information regarding dreissenid mussel permits contact the Department of Fish and Wildlife’s Invasive Species Program at (866) 440-9530 or at Invasives@wildlife.ca.gov.