



A permittee, their sub-permittee, or designee may submit to the department a request for variance to any enclosure requirement pursuant to [Section 679.4, Title 14, California Code of Regulations](#). The department will review a written request for a proposed variance and provide written notification of approval or denial with any terms and conditions imposed by the department within 15 calendar days of receiving all required information. Attach diagrams, blueprints, photographs, or other documents as needed.

☐ **Permittee**    ☐ **Sub-Permittee (Satellite Facility)**    ☐ **Authorized Person (Other Location)**

SEE INSTRUCTION PAGE. TYPE OR PRINT CLEARLY.

Section 1. Applicant Information				
First Name	M.I.	Last Name	Date of Birth	GO ID #
Mailing Address		City	State	Zip Code
Primary Telephone	Secondary Telephone		Email address	

Section 2. Location of Variance		
Physical Address	City	Zip Code
Facility Name if applicable		County
Facility Telephone	Facility Email Address	Facility website

Section 3. Proposed Variance	
Category of Variance [Check All That Apply]	
<input type="checkbox"/> Minimum Enclosure Size <input type="checkbox"/> Maximum Number of Animals <input type="checkbox"/> Construction Material/Design <input type="checkbox"/> Other: _____	
Type of Variance [Check All That Apply]	
<input type="checkbox"/> New construction <input type="checkbox"/> Existing construction <input type="checkbox"/> Other: _____	
Deviation from Requirements [Check All That Apply]	
<input type="checkbox"/> Regulation Section(s): _____ <input type="checkbox"/> Manual Table(s): _____	
<input type="checkbox"/> Affected Species or Taxa: _____	
Describe how the variance will deviate from the requirements and how it will protect and maintain the welfare of each rehabilitation animal: _____ _____ _____	

Section 4. Reason for Variance Request [Check All That Apply]	
<input type="checkbox"/> Physical limitations <input type="checkbox"/> Excessive cost <input type="checkbox"/> Other: _____	
Describe how a denial of the proposed variance may result in undue hardship: _____ _____ _____	

Section 5. Acknowledgement and Signature		
With accordance to <a href="#">California Civil Code §1633.5(b)</a> , I acknowledge that by providing my electronic signature for this form, I agree that my electronic signature is legal binding equivalent to a handwritten signature. I hereby confirm that my electronic signature represents my execution or authentication of this form, and my intent to be bound by it.		
I certify that:		
<input type="checkbox"/> I have read and am familiar with the California wildlife rehabilitation regulations, Sections 671.1 through 679.9, Title 14 of the CCR, and the Native Wildlife Rehabilitation 679 Regulations Manual (form DFW 479). I have read, understand, and agree to abide by all conditions of the permit, the applicable provisions of the Fish and Game Code, and the regulations promulgated thereto. I understand that wildlife remains the property of the State and is subject to control by the State. I understand that my facilities, equipment, and any rehabilitation animals are subject to inspections pursuant to Section 679.7, Title 14, of the CCR.		
<input type="checkbox"/> I affirm and attest under penalty of perjury that the information provided in this application and any additional information that may be provided to the Department related to this application is true and accurate to the best of my knowledge. I understand that any false statement herein may subject me to cancellation of the application, suspension or revocation of my license or permit, and/or administrative, civil, or criminal penalties.		
Applicant Signature:	Print Name:	Date:



### INSTRUCTION FOR COMPLETING THE WILDLIFE REHABILITATION VARIANCE REQUEST

Please allow 15 calendar days for the processing of your request. Incomplete forms will be returned and will delay approval or denial of a variance request. There is no fee. Contact the California Department of Fish and Wildlife, Native Wildlife Rehabilitation Program at [RehabWildlife@wildlife.ca.gov](mailto:RehabWildlife@wildlife.ca.gov) or (916) 358-2790 if you need additional information regarding a request for variance.

1. It is mandatory to complete all items.
2. Sign and date the form.
3. Email the form to the California Department of Fish and Wildlife, Native Wildlife Rehabilitation Program, based in the Wildlife Health Laboratory, to [RehabWildlife@wildlife.ca.gov](mailto:RehabWildlife@wildlife.ca.gov).
4. The enclosure(s) subject to the variance request may be required to pass an inspection by the department. The department will contact you about scheduling an appointment to inspect your proposed facility and enclosure(s).

### ----- DETERMINATION PROCESS -----

The department shall **approve** an enclosure variance request if it finds that the overall security and welfare of a rehabilitation animal shall be maintained and that the requirement will result in an undue hardship to the permittee, their sub-permittee, designee, qualified handler, or authorized person.

- The department may add terms or conditions to the variance if the department determines that such terms or conditions are necessary to protect native wildlife, animal welfare, human health and safety, or agricultural interests.
- Enclosures subject to an approved variance may deviate from otherwise applicable regulations only so far as is specified in the variance; all other regulations outside the bounds of the variance must be observed.

The department shall **deny** an enclosure variance request if it finds that the overall security and welfare of a rehabilitation animal will not be maintained, or that the requirement will not result in an undue hardship to the permittee, their sub-permittee, designee, qualified handler, or authorized person.

- At the direction of the department, the requestor shall either: (1) modify the enclosure that is the subject of the variance request, and pass an inspection; or (2) remove and replace it with an enclosure that meets the requirements of these regulations, and pass an inspection; or (3) transfer all rehabilitation animals to another location.
- A requestor whose variance request is denied may submit a written request for reconsideration to the department pursuant to subsection 679.9(e).

### ----- NOTICE -----

**Disclosure Statement**—Under [Fish and Game Code \(FGC\) Sections 395-398](#) and [Section 679.3, Title 14, of the California Code of Regulations](#), the California Department of Fish and Wildlife is authorized to collect information from applicants to maintain a record of permit. All information requested on this application is mandatory unless otherwise indicated. An applicant's name and city of residence may be provided to the public if requested. Under FGC Section 391, other personal information submitted on this application may be released for law enforcement purposes, pursuant to court order, or for official natural resources management purposes.

#### Department Determination -- Variance Request [ OFFICIAL USE ONLY ]

☐ Approve [Inspection Required]

Inspection Date: \_\_\_\_\_

Terms and Conditions: \_\_\_\_\_

☐ Approve [No Inspection Required]

Terms and Conditions: \_\_\_\_\_

☐ Deny

Complete By Date: \_\_\_\_\_

Required Action(s):

☐ Modify the enclosure that is the subject of the variance request. Inspection required.

☐ Remove and replace the enclosure with one that meets the requirements of these regulations. Inspection required.

☐ Transfer rehabilitation animals housed in the enclosure to another location at the direction of the department.

☐ Department Official Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_