

Fish & Wildlife Department
1 National Life Drive, Dewey Bldg
Montpelier VT 05620-3208
www.vtfishandwildlife.com

[phone] 802-828-1190
[fax] 802-828-1092

Agency Of Natural Resources

Dear License Applicant:

The Commissioner may issue to a Vermont resident with paraplegia or a permanent, severe, physical mobility disability a free permanent fishing license, or if qualified, a free permanent combination (hunting and fishing) license. A non-resident person with paraplegia or a permanent, severe, physical mobility disability, that resides in a state that provides a reciprocal privilege to Vermont residents may receive a free one-year fishing license, or if qualified, a one-year combination (hunting and fishing) license.

To submit for this license, please return the complete application including the following:

- The Statement of Disability form (attached) completed by your physician, certifying that your disability is paraplegia or a permanent, severe, physical mobility disability. Please inform your physician that he or she may be contacted by our department to verify this information. Unless you inform your physician of this, most will not release this information.
- The Vermont Sporting License Application form (attached) completed and signed by you.
- Proof of a previous hunting license or hunter safety card if you are requesting a combination (hunting and fishing) license. If you have had a hunting license previously but are unable to locate a copy, you may complete a license affidavit form (attached) and send it in place of a copy of your old license.

If you are a non-resident, in addition to the above documents, you must also provide a statement on letterhead from the Fish and Wildlife Department of the State in which you are a resident, stating that they provide a reciprocal privilege for Vermont residents. Currently the only two states reciprocal with Vermont is New Hampshire and Maine.

Please send all documents to the address above. If you have any questions, please contact our Licensing Unit at 802-828-1190.



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**STATEMENT OF DISABILITY TO QUALIFY FOR A PARAPLEGIC OR
MOBILITY DISABILITY FREE PERMANENT LICENSE.**

(Must be filled out by your physician. Please print or type.)

This is to certify that this applicant has been under my professional care since _____, _____ and is considered to meet the following required criteria:

***Paraplegia (defined by statute as a person who suffers from permanent paralysis of the lower half of the body with involvement of both legs.**

OR

***Permanent Severe Mobility Disability that prohibits applicant from safely navigating through the woods on foot.**

Applicant's Information:

Name: _____

Address: _____

DOB: _____ Telephone #: _____

Applicant's Signature: _____

Physician's Information:

Physician's Name _____

Physician's Address: _____

Physician's Telephone #: _____

Date: _____

Physician's Signature: _____ M.D.



Vermont Fish & Wildlife Department Sporting License Application

www.vtfishandwildlife.com

1. LAST NAME	FIRST NAME	M.I.	DATE OF BIRTH / /	
MAILING ADDRESS	CITY	STATE	ZIP	RESIDENCE <i>(Town if different from mailing)</i>
(AREA CODE) TELEPHONE NUMBER ()	SEX M F	WEIGHT lbs	HEIGHT ft in	EYE COLOR
EMAIL: _____				

2. STATUS OF LEGAL RESIDENCE

Please Initial: _____ I have resided in Vermont for the six months immediately prior to the date of making this license application, and have not during that period claimed a residence in any other state for any purpose.

Please Initial: _____ **(N)on-resident** I certify that I am **not** a resident of the state of Vermont.

LICENSE ELIGIBILITY: Valid previous license, a hunter training certificate, or an affidavit of eligibility must be presented for any hunting, archery or trapping license.

3. HARVEST INFORMATION PROGRAM
WATERFOWL AND WOODCOCK HUNTERS! YOU MUST REGISTER FOR THE HARVEST INFORMATION PROGRAM (HIP).

Call Toll Free **1-877-306-7091** (Monday - Friday, 7:45 am to 4:30 pm EST) or visit www.vtfishandwildlife.com to register and obtain your HIP number.

Write your HIP # here: _____

Waterfowl hunters 16 and older must have a valid Federal Migratory Bird Hunting Stamp and a valid Vermont Migratory Waterfowl Stamp.

4. CIRCLE LICENSE TYPES REQUESTED
1-day, 3-day, 7-day Fishing licenses fill in dates in Section 4A.

TYPE	RESIDENT	NON-RESIDENT
FISHING	28.00	54.00
5-YEAR FISHING	134.00	264.00
YOUTH FISHING	8.00	15.00
*1 DAY FISHING	N/A	21.00
*3 DAY FISHING	11.00	23.00
*7 DAY FISHING	N/A	31.00
COMBINATION	47.00	143.00
5-YEAR COMBINATION	229.00	709.00
YOUTH COMBINATION	12.00	30.00
HUNTING	28.00	102.00
5-YEAR HUNTING	134.00	504.00
YOUTH HUNTING	8.00	25.00
SMALL GAME	N/A	50.00
TRAPPING	23.00	305.00
5-YEAR TRAPPING	109.00	1,519.00
YOUTH TRAPPING	10.00	305.00
ARCHERY ONLY	N/A	75.00
ARCHERY	23.00	38.00
TURKEY	23.00	38.00
MUZZLELOADER	23.00	40.00
EARLY SEASON BEAR	5.00	15.00
WATERFOWL STAMP	7.50	7.50
NON-GAME CONTRIBUTION	\$	\$
NON-REFUNDABLE TOTAL FEES	\$	\$

4A TERM LICENSES *DATES INCLUSIVE AND CONSECUTIVE*

* VALID FROM _____ TO _____

5A. PERMANENT LICENSES FOR VERMONT RESIDENTS 66 OR OLDER - ONE-TIME FEE OF \$60

DISABLED VETERANS - *VA Documents in lieu of fee*

Complete sections 1 & 2 of this application and circle below the type(s) of license you are applying for:

FISHING ***COMBINATION (muzzleloader & turkey)**
***ARCHERY** ***TRAPPING**

* **Proof of previous license, hunter safety card or affidavit required.**

5B. SPECIALTY LICENSES - (TRIBAL, LEGALLY BLIND, MOBILITY DISABILITY)

Submit required documents in lieu of fees. Complete sections 1 & 2 of this application and circle the type of license you are applying for:

FISHING ***COMBINATION (when eligible)**

* **Proof of previous license, hunter safety card or affidavit required.**

Mail application to: Vermont Fish & Wildlife Dept.
1 National Life Dr., Dewey Bldg., Montpelier, VT 05620-3208

6. CERTIFICATION BY SIGNATURE

I hereby affirm under penalty of perjury, that I am eligible to purchase this license, that the information on this form is true to the best of my knowledge, that no Vermont hunting, fishing, or trapping license of mine is currently under revocation, nor my right to obtain one under revocation, that I am not delinquent in any obligation to pay child support or that I am in good standing with respect to any unpaid judgment issued by the judicial bureau or district court for fines and penalties for a violation or criminal offence.

SIGNATURE OF APPLICANT

SIGNATURE OF PARENT/GUARDIAN FOR APPLICANT 15 YEARS OLD OR YOUNGER