



IOWA DEPARTMENT OF NATURAL RESOURCES

Licensing Section

502 East 9th Street, Des Moines, IA 50319-0034

(515) 725-8200 www.iowadnr.gov

For Department Use Only			
Trans #:		Issued By:	
Code #:		Date Issued:	

APPLICATION FOR PERMIT TO OPERATE A MOTOR VEHICLE IN GAME MANAGEMENT AREAS, PARKS, OR PRESERVES

Please include \$2.00 for the processing/writing fee.

Please provide the completed application and supporting documentation to an address listed on page 2.

If completing online, please use the "TAB" key to navigate your way through this form. Do not press Enter.

APPLICANT INFORMATION:											
Full Name:						Phone #:					
Address:											
City/State/Zip:						County:					
*Social Security #:						Birth Date:					
Iowa DL/ID #:				DNR Customer # (If known):							
Eye Color:		Height:		ft.	in.	Weight:		lbs.	Hair Color:		
Gender:		<input type="checkbox"/> Male	<input type="checkbox"/> Female	Email:							

*The Iowa Department of Natural Resources is required to collect social security numbers from all persons obtaining a hunting, fishing or other recreational license under section 252J.8 of the Code of Iowa and 42 U.S. Code 666(a)(13). Your social security number will serve as your principal identification number to determine your eligibility for licenses. It will be provided to law enforcement agencies and the Iowa Child Support Collection Unit to establish, modify and enforce child support obligations. It WILL NOT appear on your license.

I certify that the information provided on this form is correct. I understand that providing false information makes this application invalid. Therefore, any and all licenses issued as a result will also be invalid and may be subject to penalties for making a false entry in a public record under Iowa Code 714.8(4), and for hunting, fishing, or trapping without a valid license under Iowa Code 483A.

Applicant Signature

Date

PHYSICIAN'S CERTIFICATION

I, Dr. _____ do hereby certify that I am the attending physician* of the above named applicant and declare that said applicant meets the following criteria: (CHECK ALL BOX(ES) THAT APPLY):

- The applicant is a PARAPLEGIC or QUADRIPLEGIC
- The applicant is a SIMPLE OR DOUBLE AMPUTEE OF THE LEG(S)
- The applicant is afflicted with a physical affliction which makes it IMPOSSIBLE TO AMBULATE (walk) successfully without the use of a wheeled conveyance or motor vehicle.

Physician's Name: _____ Physician's Phone: _____

Street Address: _____

City: _____ State: _____ Zip: _____

*The attending physician must be a currently practicing doctor of medicine, doctor of osteopathy, physician assistant, or nurse practitioner.

I certify and declare that the above condition is: (check one): TEMPORARY PERMANENT

Signature of Physician: _____

INFORMATION

Persons who are physically handicapped or have certain physical disabilities may obtain permits to operate motor vehicles on game management areas, parks, &/or preserves, in accordance with all restrictions.

HOW TO APPLY

- Fill out the permit application on the reverse side.
- Have your physician complete the “Physician’s Certification” portion.
- Either send or deliver the application form, including the completed Physician’s Certification, to one of the DNR offices listed on this form.
- Please include **\$2.00** for the processing/writing fee. Payment may be made by check or money order payable to ‘Iowa DNR’ and mailed with the forms. You may also fax forms to the IDNR Central Office at 515-725-8201 and make payment by credit card after the forms are received. To make a credit card payment, please contact the DNR Central Office at 515-725-8200.

GENERAL RESTRICTIONS

- Motor vehicles must be registered and display in accordance with Iowa Code.
- Game Management Areas
 - Companions are not covered under the permit.

- The area technician or biologist must be contacted annually to determine access and approved areas.
- Except where prohibited by law, a permittee may shoot from a stationary motor vehicle.
- Parks or Preserves
 - One companion may join the permittee on the motor vehicle, if it is designed for passengers.
 - The park staff must be contacted on each visit to determine access and approved areas.
- Preserves additionally
 - Central office preserve staff must be consulted before the permit and access will be granted.

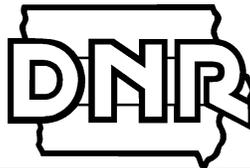
PUBLIC RECORD

After a privilege has been issued, limited recipient information will become part of the Natural Resources Commission official public record.

ADDITIONAL REGULATIONS AND INFORMATION

For additional information and details see the Iowa Administrative Code 571-51 and 571-61 and the current Iowa Hunting and Trapping Regulations, which are available at most DNR and Iowa license vendors. The Regulations are also available on the DNR’s website at www.iowadnr.gov or by contacting the DNR at 515-725-8200.

IOWA DNR LOCATIONS:



<p>NW Regional Office Spirit Lake Fish Hatchery 122 252nd Ave Spirit Lake, IA 51360 Phone: (712) 336-1840</p>	<p>NE Regional Office Manchester Fish Hatchery 22693 205th Ave Manchester, IA 52057 Phone: (563) 927-3276</p>	<p>DNR Central Office 502 E 9th St Des Moines, IA 50319 Phone: (515) 725-8200</p>	<p>SW Regional Office Cold Springs State Park 57744 Lewis Rd Lewis, IA 51544-5103 Phone: (712) 769-2587</p>	<p>SE Regional Office Lake Darling State Park 110 Lake Darling Rd Brighton, IA 52540 Phone: (319) 694-2430</p>
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(Please allow a minimum of two weeks to process mailed applications)