OMB Control No. 1018-0093 Expires 08/31/2023



APPROVAL, AMENDMENT OR RENEWAL OF A COOPERATIVE BREEDING PROGRAM (Wild Bird Conservation Act)



□New □Reissue/Renew □Amendment

Complete Sections A or B, and C, D, and E of this application. U.S. address may be required in Section C.**

A. Complete if applying as an individual							
1.a. Last name		1.b. First name		1.c. Middle name or initia		nitial	1.d. Suffix
2 Date of birth (mm/dd/yyyy) 5.a. Telephone num	ber 5.b. Alterna number	ate telephone	6. E-mail add	dress			
B. Complete if applying on behalf		ration, public a					
1.a. Name of business, agency, Tribe,	or institution		1.b. Doing busi	ness as (dba)			
2. Tax identification no.	3.a. Description of business, agency, T		ribe, or institution		3.b. Webs	3.b. Website URL (if applicable)	
4.a. Principal officer (P.O.) last name	4.b. P.O. first name		4.c. P.O. middle initial		4.b. P.O. 1	4.b. P.O. Title	
5. Primary contact name			6. Primary e-m	ail address			
7.a. Business telephone number	7.b. Alterr	Alternate phone no.		8.a. P	8.a. Primary contact telephone no.		
				I.			
C. All applicants complete addres	s information						
1.a. Physical address (Street address)	Apartment #, Suite #, o	or Room #; no P	.O. Boxes)				
1.b. City	1.c. State	e 1.d. Zip code/P		Postal code 1.e. County/Provid		1.f. Coun	try
2.a. Mailing Address (include if differen	nt than physical address	s; include name	of contact person	on if applicable)		•	
2.b. City	2.c. State	2.d. Zip code/F	ostal code	2.e. County/Prov	vince	2.f. Coun	try
D. All applicants MUST complete	<u> </u>						
 Include a check or money 13.11(d)(4)]. Federal, Trik processing fee – attach de 	y order, payable to the pal, State, and local gov	vernment agenc	ies, and those a	acting on behalf	of such agenc	ies, are ex	
If you are requesting a reis							
3. Certification: I hereby certify that I have read and am familiar with the regulations contained in Title 50, Part 13 of the Code of Federal Regulations and the other applicable parts in subchapter B of Chapter I of Title 50, and I certify that the information submitted in this application for a permit is complete and accurate to the best of my knowledge and belief. I understand that any false statement herein may subject me to the criminal penalties of 18 U.S.C. 1001.							
The individual/principal officer of the	business must print and	d sign the applic	ation. (No photo	ocopied or stamp	ed signatures)	Da	te (mm/dd/yyyy)

^{**} Further instructions for the above application may be found on our ePermits website. See the last page for information on the Privacy Act, Paperwork Reduction Act, Estimated Burden, and Freedom of Information Act aspects of this application form.

Lwant to

E. APPROVAL, AMENDMENT OR RENEWAL OF A COOPERATIVE BREEDING PROGRAM (Wild Bird Conservation Act)

NOTE 1: This application must be approved before import permits can be issued for the purpose of cooperative breeding. <u>A Cooperative Breeding Program (CBP) must have at least two members</u>. Zoological institutions may be members of a CBP. Once a program is approved, you must submit application form <u>3-200-48</u> to request import authorization for specific birds.

NOTE 2: The <u>lead</u> cooperator (as identified on page 1) for the breeding program **must submit this application**.

Complete all relevant questions on the application. Mark questions that are not applicable with "N/A". Due to the length of some questions, please use separate sheets of paper to answer the application questions. On all attachments or separate sheets you are submitting, please indicate the number of the application question you are addressing. If requesting authorization for more than one species or subspecies, please answer questions 5-10 for each species/subspecies.

<u>Electronic submission of inventories, photographs, and receipts/invoices:</u> For hard copy submissions, if you wish to provide information electronically, please include a flash drive containing this information with your physical application.

٠	want to:
	Establish a new cooperative breeding program (please answer all questions)
	Amend an existing cooperative breeding program; CBP# (If requesting new species, answers questions 4, 5, 6a, 6b, 6d, and 7; If requesting to add a member, answer question 7)
	Renew an existing cooperative breeding program; CBP# (If there are no changes to the membership or species in the CBP, please answer questions 11 and 12)
1.	Name and address where you wish the permit to be mailed, if different from physical address . If you would like expedited shipping, please enclose a self-addressed, pre-paid, computer-generated, courier service airway bill. If unspecified, all documents will be mailed via regular mail through the U.S. Postal Service.
2.	Who should we contact if we have questions about the application (name, phone number, and e-mail)?
3.	Have you or any of the owners of the business (if applying as a business, corporation, or institution), been assessed a civil penalty or convicted of any criminal provision of any statute or regulation relating to the activity for which the application is filed; been convicted, or entered a plea of guilty or nolo contendere, for a felony violation of the Lacey Act, the Migratory Bird Treaty Act, or the Bald and Golden Eagle Protection Act; forfeited collateral; OR are currently under charges for any violation of the laws mentioned above?
	No Yes
	If you answered "Yes" to Question 3, provide: a) the individual's name; b) date of charge; c) charge(s); d) location of incident; e) court, and f) action taken for each violation. Please be aware that a "Yes" response does not automatically disqualify you from getting a permit.

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4.	A desc	ription of the species/subspecies to be covered (imported) under the program, including:
	a.	Scientific name (genus, species, and, if applicable, subspecies) and common name;
	b.	Number of birds requested to meet the goals of the program (Note : indicate the <u>total</u> number of birds to be imported by <u>all</u> the members of the CBP for the life of the program);
	C.	The minimum number of participating facilities need to achieve management objectives – provide an explanation of how this number was derived; and
	d.	Desired sex ratio.
5.	populat should introdu	ment justifying the need for this approval, which includes information on the current U.S. captive ion of the requested species/subspecies and the need for import of additional specimens. Information include, if applicable, whether there is high trade of the species; it is being captive-bred for rection purposes; you are collaborating with other groups to promote in-situ conservation, and the ability of the species in the long-term.
	a.	Provide a description of the cooperative breeding program that includes: managing genetic diversity as an important component to creating a long-term sustainable captive population; what scientifically grounded method(s) the CBP intends to use to measure both projected and current levels of genetic diversity within the population; and for projected gene diversity, the time frame that will be considered (for example, projected gene diversity at 100 years of 10 generations);
	b.	Description of the long-term plans for developing and maintaining a self-sustaining population in captivity of the exotic bird species;
	C.	Details on the system of record keeping and tracking of birds and their offspring, including how individual specimens will be marked or otherwise identified;

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	d.	Explanation on the relationship of the cooperative breeding program to the conservation of the exotic bird species in the wild. Include information on whether you anticipate importing captive-bred birds or wild caught birds and include identified sources to ensure that the number of birds that you anticipate needing will be available;
	e.	Information on the long-term funding of the cooperative breeding program to ensure its existence until the CPB's breeding goals are met; and
	f.	Detailed plans for the placement of the program birds and any offspring, recalling that birds imported as part of a cooperative breeding program <u>cannot</u> be loaned, sold or otherwise transferred to a non-member without prior authorization of this office. Additionally, provide a description of how program birds will be dealt with if a member(s) leaves the program or if the program is voluntary terminated (members decide to disband and the program is not renewed) or involuntarily terminated (the Service does not renew the CBP).
6.	facilitie	be care and maintenance of the requested species/subspecies, and how each prospective member's se meet professionally recognized standards (if requesting to amend an established CBP by adding sembers, please provide the following for each proposed new member):
	a.	Name and addresses of each facility where the birds, by species, will be maintained;

b. In the table below, please provide the requested information for each type of holding space that will be used to house CBP birds. Use one row for each holding

1. CBP	Aviary type (outdoor	3. Dimensions of specific	4. How many	5. What species will	6. How many birds will be	7. Will the birds be housed here permanently? If
member,	vs. indoor flight cage,	aviary/holding space (WxLxH).	aviaries fit these	be housed in this	housed in each of the	not, please provide additional information in the
facility name	etc.). Add a separate	Please specify units (feet,	specifications?	type of aviary?	aviaries?	comments box below (i.e. why will the birds be
	row for type of aviary.	inches, etc.)				moved and for how long).
		,				,
EXAMPLE	Outdoor flight	10'x10'x8'	4	Amazona	Up to 4 birds in two of the	These cages will be used to socialize young birds
	_			ochrocephala	flight cages. The two	or for surplus birds
				,	remaining flight cages will be	·
					vacant for future imports.	
	Outdoor flight	8'x5'x7'	2	Amazona	2	These will be permanent breeding cages and the
	g		_	ochrocephala	_	birds will remain here for multiple breeding
				00000,0		seasons. If these birds are transferred, we will
						include that information in our CBP annual report.
						include that information in our CBF aimual report.
	1	1	l	l		

space type (flight cages with different dimensions should be listed on separate rows as should indoor vs. outdoor aviaries).

C.	For each type of aviary listed above, please provide a photo with a caption indicating the 'type' as listed in column
d.	Please provide information on where any progeny will be housed.
e.	Please provide husbandry practices specific to each species as necessary.
f.	Provide a qualification statement for EACH individual who will be participating in CBP. This statement should include records showing the participant's prior breeding experience with bird species that are the same or similar to the species in the CBP.
7.	Each CBP must identify an appropriate avicultural, zoological, or conservation organization that has agreed to oversee its activities. Please provide a statement from the designated oversight organization, on the organization's letterhead, that includes at a minimum:
	a. Description of the expertise of the organization to serve as an oversight organization;
	b. Criteria for acceptance of individuals into the proposed breeding program;

c. How participation in the program will be monitored; and d. Relationship of the oversight organization to the CBP in establishing and maintaining a selfsustaining captive population of the exotic bird species or enhancing the conservation of the species in the wild. 8. If you are amending or renewing a program, you must also provide the following information in a table format: a. The number, species, and sex of all birds that have been imported to date for your CBP, including dates of import, countries of origin, disposition of the imported birds for each importer, and associated permit numbers for each permit. Identify the number of birds within each species and their sex held at each facility; b. For each program participant, a summary of any breeding activity that has been achieved with the imported birds, including the number of eggs and progeny produced, and the disposition of any progeny; c. For each program participant, a summary of any mortality, including mortality during transit or quarantine (for birds that died in quarantine, you must provide appropriate documentation from USDA/Veterinary Services) of birds imported as part of the approved cooperative breeding program, as well as details of any post-fledging mortality of their progeny;

	d.	A summary of progress made towards achieving a self-sustaining captive population of each species;
	e.	An explanation of any substantive changes that have or will occur regarding any aspect of the approved cooperative breeding program; and
	f.	An official letterhead statement from the designated oversight organization approving the amendment or renewal.
9.	informa	e a signed and dated statement from <u>each</u> CBP member. The statements must contain the following ation: Member name;
	b.	Scientific name of all species being requested for the program;
	C.	Statement that the member is aware of the purposes of the cooperative breeding program and the Wild Bird Conservation Act and will abide by the regulations and conditions placed on the program, if it is approved.

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NOTICES

PRIVACY ACT STATEMENT

Authority: The information requested is authorized by the following: the Bald and Golden Eagle Protection Act (16 U.S.C. 668), 50 CFR 22; the Endangered Species Act (16 U.S.C. 1531-1544), 50 CFR 17; the Migratory Bird Treaty Act (16 U.S.C. 703-712), 50 CFR 21; the Marine Mammal Protection Act (16 U.S.C. 1361, et seq.), 50 CFR 18; the Wild Bird Conservation Act (16 U.S.C. 4901-4916), 50 CFR 15; the Lacey Act: Injurious Wildlife (18 U.S.C. 42), 50 CFR 16; Convention on International Trade in Endangered Species of Wild Fauna and Flora (TIAS 8249), 50 CFR 23; General Provisions, 50 CFR 10; General Permit Procedures, 50 CFR 13; and Wildlife Provisions (Import/export/transport), 50 CFR 14.

Purpose: The collection of contact information is to verify the individual has an eligible permit to conduct activities which affect protected species. This helps FWS monitor and report on protected species and assess the impact of permitted activities on the conservation and management of species and their habitats.

Routine Uses: The collected information may be used to verify an applicant's eligibility for a permit to conduct activities with protected wildlife; to provide the public and the permittees with permit related information; to monitor activities under a permit; to analyze data and produce reports to monitor the use of protected wildlife; to assess the impact of permitted activities on the conservation and management of protected species and their habitats; and to evaluate the effectiveness of the permit programs. More information about routine uses can be found in the System of Records Notice, Permits System, FWS-21.

Disclosure: The information requested in this form is voluntary. However, submission of requested information is required to process applications for permits authorized under the listed authorities. Failure to provide the requested information may be sufficient cause for the U.S. Fish & Wildlife Service to deny the request.

PAPERWORK REDUCTION ACT STATEMENT

We are collecting this information subject to the Paperwork Reduction Act (44 U.S.C. 3501) in order provide the U.S. Fish and Wildlife Service the information necessary, under the applicable laws governing the requested activity, for which a permit is requested. Information requested in this form is purely voluntary. However, submission of requested information is required in order to process applications for permits authorized under the applicable laws. Failure to provide all requested information may be sufficient cause for the U.S. Fish and Wildlife Service to deny the request. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. OMB has approved this collection of information and assigned Control No. 1018-0093.

ESTIMATED BURDEN STATEMENT

We estimate public reporting for this collection of information to average 3 hours, including time for reviewing instructions, gathering and maintaining data and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of the form to the Service Information Clearance Officer, Fish and Wildlife Service, U.S. Department of the Interior, 5275 Leesburg Pike, MS: BPHC, Falls Church, VA 22041-3803, or via email at lnfo_coll@fws.gov.

Please do not send your completed form to this address.