

Department of the Interior U.S. Fish and Wildlife Service Form 3-186A

<u></u>	
	USFWS Use Only Received in Regional Office on

/	/

Initials:

MIGRATORY BIRD ACQUISITION AND DISPOSITION REPORT Please see reverse for instructions

1	SPECIES: USFWS Band Number:					
	Sex: Male Female Unknown Source: Captive-bred Wild Microchip Number: (if applicable)					
	Age: Nestling Immature Adult Year of Hatch:					
2	SENDER (person transferring bird) USFWS Permit No.:					
	Name: Date of Transfer (or other action):					
	Address:					
	City: State: Zip:					
	E-Mail Address:					
	USFWS Permit Type: ☐ Falconry ☐ Raptor Propagation ☐ Rehabilitation (see instructions) ☐ Other:					
	If a Transfer: □ Gift □ Sale □ Loan					
	If Release or Loss: ☐ Release ☐ Escape ☐ Theft ☐ Death Cause of Death:					
3	RECIPIENT (person acquiring bird) USFWS Permit No.:					
	Name: Date of Acquisition:					
	Address:					
	City: State: Zip:					
	E-Mail Address:					
	USFWS Permit Type: Raptor Propagation Other:					
	Type of Acquisition: ☐ Gift ☐ Purchase ☐ Loan ☐ Capture/Recapture (complete section 4)					
4	CAPTURE OR RECAPTURE (bird taken from the wild; provide band number in Section 1) ☐ Capture ☐ Recapture					
	For all species, County (or comparable subdivision) and State of trapping location:					
	If you captured a gyrfalcon, what color is it? \square Grey \square Black \square White \square Unknown (Nestling)					
5	RE-BANDING (to report the re-banding of a wild or captive-bred bird)					
	Old Number:					
	New Number:					
6	CERTIFICATION. I certify that the information submitted above is true and correct to the best of my knowledge. I understand that making a false statement may subject me to the criminal penalties of 18 U.S.C. 1001.					
	Print name: Phone Number (with area code):					
	Signature: Date:					

INSTRUCTIONS

1. This form is for use of holders of Federal Raptor Propagation permits and Federal or State Falconry permits. It must be completed for each transfer, acquisition, release, loss, or rebanding of a migratory bird held under the permit. You must submit it to the appropriate U.S. Fish and Wildlife Service office or, in the case of falconry permittees residing in states that have converted to the new federal regulations, to your state falconry permitting office, within 5 days of the activity. Falconry permittees in States that have converted to the new State-permit-only regulations may submit the information in the electronic database at http://permits.fws.gov/186A.

If you have	then you must complete sections:
transferred a bird to another permittee (or to another permit you hold),	1, 2, 3, and 6.
released a bird or lost a bird due to its escape, theft, or death,	1, 2, and 6.
acquired a bird from another permittee, other than a rehabilitator,	1, 2, 3, and 6.
acquired a bird from a rehabilitation permittee	1, 2, 3, and 6
captured a bird from the wild or recaptured a previously captive (banded) bird,	1, 3, 4, and 6.
re-banded a bird, either wild or captive-bred, for which the band was lost or removed,	1, 2, 5, and 6.

2. Retain one copy of the completed form, mail one copy to your State permit office, and mail the original to the USFWS Migratory Bird Permit Office responsible for your State. Falconry permittees in States that have converted to the new State-permit-only regulations may submit the information in the electronic database at http://permits.fws.gov/186A in lieu of sending copies to your State and FWS permit office.

USFWS Region	Area of Responsibility	Migratory Bird Permit Office Mailing Address
1	Hawaii, Idaho, Oregon, Washington, Pacific Island Territories	911 N.E. 11 th Avenue Portland, OR 97232-4181 (503) 872-2715
2	Arizona, New Mexico, Oklahoma, Texas	P.O. Box 709 Albuquerque, NM 87103 (505) 248-7882
3	Illinois, Indiana, Iowa, Michigan, Minnesota, Missouri, Ohio, Wisconsin	5600 American Blvd. West, Suite 990, Bloomington, MN 55437-1458 (612) 713-5436
4	Alabama, Arkansas, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Puerto Rico, Virgin Islands	P.O. Box 49208 Atlanta, GA 30359 (404) 679-7070
5	Connecticut, Delaware, District of Columbia, Maine, Maryland, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, Vermont, Virginia, West Virginia	P.O. Box 779 Hadley, MA 01035-0779 (413) 253-8643
6	Colorado, Kansas, Montana, Nebraska, North Dakota, South Dakota, Utah, Wyoming	P.O. Box 25486, DFC (60154) Denver, CO 80225-0486 (303) 236-8171
7	Alaska	1011 East Tudor Road (MS 201) Anchorage, AK 99503 (907) 786-3693
8	California, Nevada	2800 Cottage Way Sacramento, CA 95825 (916) 978-6183

Notice

Privacy Act (5 U.S.C.552a): The gathering of information on fish & wildlife is authorized by the Migratory Bird Treaty Act (16 U.S.C. 703 et seq.), & Parts 13 & 21 of Title 50 of the Code of Federal Regulations. Disclosure of the requested information is necessary for administration of permits under MBTA & is a condition of your permit. Failure to disclose all of the requested information may be sufficient cause for revocation of your permit. The information will be used to monitor disposition of captive birds & the take of birds from the wild. If the information indicates a violation of a statute, regulation, rule, order, or license, whether civil, criminal, or regulatory in nature, the information may be transferred to the appropriate Federal, State, local, or foreign agency charged with investigating or prosecuting such violations. (Ref. 69 FR 5261, Sept 4, 2003) Paperwork Reduction Act (44 U.S.C.3501): An agency may not conduct or sponsor, & a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The public reporting burden estimate for reviewing instructions, gathering & maintaining data, & completing this form is 15 minutes. Comments on the form, including the burden estimate, should be mailed to the Information Collection Clearance Officer (Ref 1018-0022), Mail Stop 222-ARLSQ, Fish & Wildlife Service, U.S. Department of the Interior, 1849 C Street, NW, Washington, D.C. 20240.