



Michigan Department of Natural Resources – Wildlife Division

# PRIVATELY OWNED CERVIDAE FACILITY RENEWAL REGISTRATION AND BUSINESS PLAN APPLICATION

Issued under the authority of Executive Order No. 2004-3 and Act 190 of P.A. 2000. Failure to comply with the requirements of Act 190 may result in fines, imprisonment, or both.

DNR Cashier's Use Only

**NOTE: Application must be legible and completed in its entirety to be processed.**

<u>RENEWAL OF HERD NO.</u> _____	<u>REGISTRATION CLASS</u>	<u>REGISTRATION FEE</u>
	<input type="checkbox"/> CLASS I (HOBBY)	\$450
	<input type="checkbox"/> CLASS II (EXHIBITION)	\$450
	<input type="checkbox"/> CLASS III (RANCH)	\$750
	<input type="checkbox"/> CLASS IV (FULL REGISTRATION)	\$750

Applicant Full Name		Business/Facility Name	
Applicant Mailing Address		Facility Address	
City, State, ZIP		City, State, ZIP	
Telephone	E-Mail Address (Optional)	Business Telephone	Business FAX
Size of Property Enclosed Acres**	County	Township	Section(s)

*\*\*If the facility has been modified (expanded or reduced) since the previous application, attach a copy of the deed or other appropriate documentation showing the legal description and a diagram showing the measurements.*

Existing Cervidae Species

<input type="checkbox"/> White-tailed Deer # _____	<input type="checkbox"/> Fallow Deer # _____	<input type="checkbox"/> Sika Deer # _____	<input type="checkbox"/> Elk # _____
<input type="checkbox"/> Reindeer # _____	<input type="checkbox"/> Red Deer # _____	<input type="checkbox"/> Other (specify) _____	# _____

Existing Method of Fencing

Height  4 ½ Foot  8 Foot  10 Foot  Other (specify) \_\_\_\_\_

Type  Woven Wire  Chain Link  Other (specify) \_\_\_\_\_

Do you wish to have your facility name and contact information given to the public by the Department?  Yes  No

*I certify that the information contained in this application and all attachments are true and correct to the best of my knowledge.*

Applicant Signature _____	Date _____
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Make check or money order payable to “**State of Michigan.**” Return application with appropriate registration fee to:

**CASHIER  
MICHIGAN DEPARTMENT OF NATURAL RESOURCES  
PO BOX 30451  
LANSING MI 48909-7951**



**PRIVATELY OWNED CERVIDAE FACILITY  
RENEWAL REGISTRATION APPLICATION AND BUSINESS PLAN**

**INSTRUCTIONS**

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A renewal application is completed when a facility is currently registered, and the registration is expiring. Registrations expire three (3) years from the date of issuance. Applications must be submitted 60 days prior to the expiration of current registration.

**Herd Number:** The eight-digit number assigned to the facility and Cervidae herd. The herd number must be written on the application.

**Fee:** Enclose a check or money order payable to the "State of Michigan" for the appropriate amount, as indicated below.

**Registration Class:** Indicate the appropriate registration class for the intended purpose of the facility. See Operational Standards for Registered Privately Owned Cervidae Facilities, December 2005, for additional facility class descriptions.

- Class I (Hobby) – Renewals only - Cervidae are pets only; no live Cervidae are allowed to leave premises - \$450
- Class II (Exhibition) – Cervidae are shown live for exhibition purposes only - \$450
- Class III (Ranch) – Hunting preserves or ranches, no live Cervidae are allowed to leave premises - \$750
- Class IV (Full Registration) – Breeding, buying, selling, and movement of live Cervidae - \$750

**NOTE:** For Classes I, II, and IV, all animals must be tagged with two forms of identification. See the enclosed Michigan Department of Agriculture (MDA) information *Cervid Identification Options*.

**Legal Description of Property:** Refers to the full description commonly found on deeds or title insurance documents (e.g., North ½ of south ½ of southwest ¼ of northwest ¼ of section 16 township 5 north range 2 west Clinton County, Michigan).

**Cervidae Species:** Indicate all species currently held and the population goal numbers for each species.

**Method of Fencing:** Indicate the existing height and type of fencing.

**Signature:** Sign and date the application. Your signature certifies that you are aware of and will abide by:

- [registration requirements as described within Act 190, Public Acts of 2000;](http://www.legislature.mi.gov)  
<http://www.legislature.mi.gov>
- [Executive Order No. 2004-3;](http://www.michigan.gov/gov/)  
<http://www.michigan.gov/gov/> and
- [Operational Standards For Registered Privately Owned Cervidae Facilities, December 2005.](http://www.michigan.gov/dnr)  
<http://www.michigan.gov/dnr>, select Wildlife & Habitat, then select Privately-owned Cervidae

**Submit Application:** Mail the application with your check or money order to the Michigan DNR Cashier at the address on the front of the application.

**Questions? Contact:** **POC Program Coordinator** **517 284-6184**  
**Attn: Ryan Soulard**  
**Wildlife Division**  
**Michigan Department of Natural Resources**  
**PO Box 30444**  
**Lansing, Michigan 48909-7944**