

# MEW FACILITY INSPECTION AGREEMENT FORM



NEW MEXICO DEPARTMENT OF GAME & FISH  
LE FIELD OPERATIONS DIVISION  
SPECIAL USE PERMITS PROGRAM  
ONE WILDLIFE WAY  
SANTA FE, NM 87507  
Email: [DFG.Permits@dof.nm.gov](mailto:DFG.Permits@dof.nm.gov)

## INSPECTION TO BE DONE FOR:

Permit Class: \_\_\_\_\_ (If applicable)  
Permit No.: \_\_\_\_\_ (If applicable)  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone/Email: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## MASTER FALCONER OR DEPARTMENT REPRESENTATIVE WHO AGREES TO INSPECT THE MEW FACILITY & EQUIPMENT

Permit Class: \_\_\_\_\_  
Permit No.: \_\_\_\_\_  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone/Email: \_\_\_\_\_

\_\_\_\_\_  
Signature of Inspector

\_\_\_\_\_  
Date

# FEDERAL & STATE FALCONRY MEW FACILITIES AND EQUIPMENT INSPECTION REPORT



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## PART I - FACILITIES

A.	MEWS (INDOOR FACILITY)	YES	NO
	1. Space to allow easy access and maintenance .....	<input type="checkbox"/>	<input type="checkbox"/>
	2. Space to allow raptor(s) to fully extend wings .....	<input type="checkbox"/>	<input type="checkbox"/>
	3. At least one window provided .....	<input type="checkbox"/>	<input type="checkbox"/>
	4. Each window with vertical bars/rods on inside .....	<input type="checkbox"/>	<input type="checkbox"/>
	5. At least one secure door - can be easily closed .....	<input type="checkbox"/>	<input type="checkbox"/>
	6. Other doors, if any, serve to protect facility .....	<input type="checkbox"/>	<input type="checkbox"/>
	7. Floor surface dry or well drained - can be easily cleaned .....	<input type="checkbox"/>	<input type="checkbox"/>
	8. One perch of an acceptable design for each raptor .....	<input type="checkbox"/>	<input type="checkbox"/>
B.	WEATHERING AREA	YES	NO
	1. Space to allow tethered raptor(s) to bate (attempted flight) without striking wings on side or top of facility .....	<input type="checkbox"/>	<input type="checkbox"/>
	2. Sides of facility fenced with suitable material to exclude predators .....	<input type="checkbox"/>	<input type="checkbox"/>
	3. Top of facility covered with netting, wire, or roofed to exclude predators - OR - Top of facility open <u>provided</u> weathering perch(es) are greater than 6 ½ feet in height.....	<input type="checkbox"/>	<input type="checkbox"/>
C.	ENVIRONMENTAL PROTECTION	YES	NO
	The facilities, singly or in combination, provide adequate protection to the raptor(s) from:		
	1. Excessive heat .....	<input type="checkbox"/>	<input type="checkbox"/>
	2. High winds and winter storms .....	<input type="checkbox"/>	<input type="checkbox"/>
	3. Avian and ground predators .....	<input type="checkbox"/>	<input type="checkbox"/>
	4. Disturbance which would likely cause injury .....	<input type="checkbox"/>	<input type="checkbox"/>

(Over)

**PART II - EQUIPMENT**

- |    |  |                          |                          |
|----|--|--------------------------|--------------------------|
| A. | <b>RAPTOR EQUIPMENT</b>  | YES                      | NO                       |
|    | 1. One pair of Alymeri (style) jesses for each raptor. (An Alymeri jess consists an anklet, grommet, and a removable strap for attaching the anklet and grommet to the swivel.).....           | <input type="checkbox"/> | <input type="checkbox"/> |
|    | 2. One swivel of an acceptable design for each raptor. (Dog leash/fishing snap-swivels, and swivels with soft copper/aluminum rivets are rarely acceptable, except for use on kestrels.) ..... | <input type="checkbox"/> | <input type="checkbox"/> |
|    | 3. One leash of quality leather or synthetic material for each raptor .....  | <input type="checkbox"/> | <input type="checkbox"/> |
| B. | <b>REQUIRED ANCILLARY EQUIPMENT</b>  | YES                      | NO                       |
|    | 1. One bath container, 2 to 6 inches deep and wider than length of the raptor for each bird .....  | <input type="checkbox"/> | <input type="checkbox"/> |
|    | 2. One outdoor perch of an acceptable design for each raptor .....   | <input type="checkbox"/> | <input type="checkbox"/> |
|    | 3. A reliable weighing scale or balance graduated in increments of not more than ½ ounce (15 grams) .....  | <input type="checkbox"/> | <input type="checkbox"/> |

**PART III - CERTIFICATION**

- APPROVED - Facilities and equipment meet Federal/State Standards.
- PROVISIONAL APPROVAL - Except as indicated below, facilities and equipment meet Federal/State Standards. Applicant agrees to correct all deficiencies within 30 days.
- NOT APPROVED - Facilities and equipment fail to meet Federal/State Standards.
- DEFICIENCIES \_\_\_\_\_

Applicant (permittee) has provided facilities for \_\_\_\_\_ bird(s) for falconry purposes.

Applicant (permittee) currently has (circle one) 0 1 2 3 birds in his/her possession.

**Certifying Person**

Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Agency: \_\_\_\_\_  
 Signature: \_\_\_\_\_

**Applicant**

I agree to correct deficiencies, if any, within 30 days and to maintain facilities/equipment at or above Federal/State Standards.  
 Signature: \_\_\_\_\_