

SHOOTING PRESERVE PERMIT APPLICATION



Permit Fee \$200.00/year
(September 1 – March 31)

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

FOR DEPARTMENT USE ONLY
Check # _____
Amount \$ _____
Date ____/____/____
Initials _____

Shooting Preserve applications must be reviewed and the property assessed by department specialists, a recommendation will be prepared and presented to the State Game Commission for final approval and permit issuance. This process can take several months; applicants are encouraged to contact the department prior to submitting the application. Missing documentation may substantially delay the application process. Approval is not guaranteed.

- **Shooting Preserve licenses are issued for private land only.**
- **Proof of ownership and/or lease of private land must be submitted, applications will not be processed until all required documents are provided to the department.**
- **Attach plats, deeds and maps giving the dimensions of the proposed Shooting Preserve.**
- **The season of operation for all Shooting Preserves is September 1st to March 31st**

Applicant's name/address	Property Owner's name/address	Manager's name/address
_____	_____	_____
_____	_____	_____
_____	_____	_____
Phone No. _____	Phone No. _____	Phone No. _____
Email _____	Email _____	Email _____

NAME OF PRESERVE: _____
MAILING ADDRESS: _____
CITY, STATE, ZIP: _____
TELEPHONE NO. _____ **EMAIL:** _____

LOCATION OF SHOOTING PRESERVE:
COUNTY _____ SECTION(s) _____ TOWNSHIP(s) _____ RANGE(s) _____
Direction and distance from nearest community: _____

Total privately owned acreage requested for Shooting Preserve _____ describe habitat acreage below

No. of acres:	Owned	_____	Grassland or water	_____
No. of acres:	Leased	_____	Forest or woodland	_____
No. of acres:	Cultivated	_____	Cleared, not cultivated	_____

SPECIES	Approximate Number to be released		Approximate Number found wild on Preserve at date of application
	PURCHASED	REARED	
PHEASANT			
CHUKARS			
QUAIL, BOBWHITE			
QUAIL, GAMBLE'S			
QUAIL, SCALED			
MALLARD DUCKS			

Other game birds or game mammals found on property: _____

Of these, the following reproduce naturally in the wild on the property: _____

I HEREBY CERTIFY THAT I HAVE READ AND AGREE TO ABIDE BY ALL PROVISIONS OF REGULATION 19.35.3 NMAC AND SECTIONS 17-3-35 THROUGH 17-3-42 NMSA 1978.

Applicant's Signature

Date

Property Owner's Signature and Consent Authorization

Date

Property Owner's consent authorization shall be valid for the life of the permit, and as long as the permit is renewed, unless the property owner notifies the Department of Game and Fish in writing to rescind the consent authorization to this permittee.

DEPARTMENT USE ONLY

	Disapproved	Approved	Signature	Date
Local Conservation Officer	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Area Wildlife Biologist	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Area Captain	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

Comments: _____

