

MEW FACILITY INSPECTION AGREEMENT FORM



NEW MEXICO DEPARTMENT OF GAME & FISH
FIELD OPERATIONS DIVISION
SPECIAL USE PERMITS PROGRAM
P.O. BOX 25112
SANTA FE, NEW MEXICO 87504
505-476-8064 / Fax 505-476-8133
Email: DFG.Permits@state.nm.us

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

		YES	NO
A.	MEWS (INDOOR FACILITY)		
	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		
	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		
	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. **RAPTOR EQUIPMENT** 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.).....
 - 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.)
 - 3. One leash of quality leather or synthetic material for each raptor
- B. **REQUIRED ANCILLARY EQUIPMENT** YES NO
- 1. One bath container, 2 to 6 inches deep and wider than length of the raptor for each bird
 - 2. One outdoor perch of an acceptable design for each raptor
 - 3. A reliable weighing scale or balance graduated in increments of not more than ½ ounce (15 grams)

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 Agent

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: _____