

YEAR: _____

NAME OF LICENSEE: _____

REGISTER TRANSFERRED ANIMAL	Date of transfer	Unique rescue identification number	Species	Reason for transfer	Transferred to (name, address and licence number)

QUESTIONS MAY BE DIRECTED TO

Wildlife Licensing and Management Unit
PO Box 1967 Hurstville NSW 1481
Phone: (02) 9585 6406
Fax: (02) 9585 6401
Email: wildlife.licensing@environment.nsw.gov.au



Environment,
Climate Change
& Water