

## CHANGE OF ADDRESS OR CONTACT INFORMATION

For Office Use Only Received Date Stamp

License Number:

## THIS FORM IS ONLY FOR UPDATES TO LICENSES AND PERMITS ISSUED BY THE SPECIAL LICENSES UNIT.

To request an amendment to your license, use License Amendment Request Application form: https://www.dec.ny.gov/docs/wildlife\_pdf/sluamendapp.pdf

License Type (Special Licenses ONLY, including Guide Licenses):

To add or remove designated agents from your license, use Request to Add Designated Agents form: https://www.dec.ny.gov/docs/wildlife\_pdf/sludesignatedagent.pdf

Use this form to report any changes in your name, address or contact information. The Department will use the information you provide for all correspondence. Please include the type of license(s) or permits that you hold, as well as the license number(s).

Name (As currently on file with the Department):				New Name:						
Last	First		M.I.	Last	First		M.I.			
			•		•					
Contact Information (As currently on file with the Department):										
Email	Home Phone Number		Work Phone Number		Mobile Number					
New Contact Information:										
Email	Home Phone Number			Work Phone Number		Mobile Number				
Mailing Address (As currently on	file with the De	partment):								
Street Address										
City/ Town		State		ZIP Code Cou		nty				
New Mailing Address:										
Street Address										
City/ Town		State		ZIP Code Cou		nty				

Facility Address (As currently on file with the	Department):			
Street Address				
City/ Town	State	ZIP Code	County	
New Facility Address, where licensed animals	will be held: *NOTE	E: If this facility is used as a falc	onry mews or wildlife rehabilitation f	RVS
Street Address				
City/ Town	State	ZIP Code	County	
NOTICE: False statements made herein are punish	nable as a Class A Miso	demeanor pursuant to Section	210.45 of the penal law.	
Signature			 Date	

This form may only be used for current and valid licenses. If your license has expired, you will need to submit a new license application form following the license procedures outlined on the Department's web page: <a href="http://www.dec.ny.gov/permits/359.html">http://www.dec.ny.gov/permits/359.html</a>

MAIL YOUR COMPLETED APPLICATION AND REQUIRED DOCUMENT(S) TO:

NYS Department of Environmental Conservation

Special Licenses Unit · 5th Floor

625 Broadway · Albany, New York 12233

For questions or concerns, please contact us
Phone: (518) 402-8985 · Fax: (518) 402-8925
Email: SpecialLicenses@dec.ny.gov
Website: https://www.dec.ny.gov/permits/359.html