



Application and Temporary Permit for a DISABILITY PERMIT TO HUNT FROM A STANDING MOTOR VEHICLE

* Permits will expire and will need to be renewed five years from the date of application

I. APPLICANT SECTION:

I, The undersigned, hereby apply for a special permit, without fee, based upon my disability status. By my signature, I attest that I believe I am permanently disabled. I have a valid disability parking certificate or license plates for physically disabled persons, issued by the Department of Public Safety or Tribal Government. Because of my permanent disability, I am either:

- (1) **Unable to step from a vehicle** without the aid of a wheelchair, crutches, braces, or other mechanical support or prosthetic device; or
- (2) **Unable to walk** any distance because of a permanent lung, heart, or other internal disease AND use supplemental oxygen to assist breathing.

Applicant's Name (First, Middle, Last) (PRINT or TYPE)	Date of Birth	1854 Identification Card Number
Address (No. & Street, City, State, Zip Code)		Telephone Number (Include Area Code)
• Disability Parking Certificate Number or • Disability License Plate Number		Issue date of Parking Permit or License Plates
Applicant's Signature (*Please see penalty note below before signing.)		Date

II. PHYSICIAN/CHIROPRACTOR SECTION:

The above applicant is applying for a disability permit. 1854 Code restricts such permits to persons who have a substantial permanent disability. This disability must be verified in writing by a licensed physician, certified nurse practitioner or certified physician's assistant acting under the direction of a licensed physician or chiropractor. In order to qualify for this permit, 1854 Code requires that the person is either:

- (1) Unable to step from a vehicle without the aid of a wheelchair, crutches, braces, or other mechanical support or prosthetic device; or
- (2) Unable to walk any distance because of a permanent lung, heart, or other internal disease requiring the use of supplemental oxygen to assist breathing.

THE FOLLOWING IS A BRIEF STATEMENT OF THE DISABILITY: (Please complete this entire section.)

- This is a **permanent disability**, and the applicant is: *(Please circle the appropriate number.)*
 1. **Unable to step from a vehicle** without the aid of a wheelchair, crutches, braces, or other mechanical support or prosthetic device.
 2. **Unable to walk** any distance because of a permanent lung, heart, or other internal disease requiring the use of supplemental oxygen to assist breathing.

Please Describe: (The 1854 Treaty Authority may request additional information if needed to verify eligibility for this permit.)

I certify that I am a licensed physician or chiropractor. I have examined the above named applicant and verify that this individual is permanently disabled and meets the criteria for this permit as described in the above section.

Physician or Chiropractor Name (First, M.I., Last) (PRINT or TYPE)	Daytime telephone Number (Include Area Code)
Licensed Physician or Chiropractor Signature <i>(*Please see penalty note below before signing.)</i>	Date

* PENALTY NOTE FOR SIGNATURES: A person who knowingly makes a false application or assists another in making a false application for this permit is guilty of an offense.

PLEASE SEE OTHER SIDE FOR PERMIT CONDITIONS, ADDITIONAL INFORMATION, AND INSTRUCTIONS

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III. PERMIT CONDITIONS:

1. The permittee must follow all laws and rules, including but not limited to:
 - a. This permit is valid for any type of motor vehicle (*car, truck, ATV, snowmobile*).
 - b. The vehicle must be stationary.
 - c. If you are hunting big game, your vehicle cannot be within the road right-of-way.
 - d. A person may not discharge a firearm, or an arrow from a bow or crossbow on, over, across, or within the right-of-way of an improved public highway (including but not limited to federal, state, county, and township roadways) at a big game animal or decoy of a big game animal that has been set out by a licensed peace officer.
 - e. You may not transport a loaded firearm, bow, or crossbow. Please see the 1854 Code regulations for transportation of uncased firearms.
 - f. The permit does not provide any trespass exemptions.
2. The permit is valid for five years from the date of application. This permit may be revoked, amended, suspended, or modified at any time for cause, including but not limited to: Change in permit laws or rules; change in disability eligibility; or violation of hunting, trespass, or firearms transportation laws.
3. Both this permit and a valid license must be in possession while hunting from a motor vehicle.
4. The permit application/temporary permit is valid only when fully completed, signed by the applicant, signed by a licensed physician or chiropractor, and a duplicate copy has been submitted to the 1854 Treaty Authority (see address below). There are no further approvals required. Please keep the original application, this will be your temporary permit until you receive your permit card in the mail.
5. The completed and signed permit form (duplicate) must be returned to the 1854 Treaty Authority:

**1854 Treaty Authority
4428 Haines Road
Duluth, MN 55811-1524**

**Phone (218) 722-8907
(800) 775-8799 (toll free)
Fax (218) 722-7003**