

Commonwealth of Virginia
Department of Wildlife Resources
Access Permit Waiver Application

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Please identify the property you wish to use

☐ Wildlife Management Area \_\_\_\_\_

☐ DWR-owned Public Fishing Lake \_\_\_\_\_

Timeframe ☐ Daily permit for (List dates) \_\_\_\_\_

Purpose ☐ Habitat volunteer working on (list project) \_\_\_\_\_

☐ Explain other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

~~~~~  
Application Date _____

Applicant:

Name _____

Organization _____

Address _____

City/State/Zip _____

Phone _____

Email _____

Group Size _____ (if 12 or more participants, see Stipulation #2 below)

Stipulations:

1. Once approved, this waiver replaces the otherwise required Access Permit for the specified property and date(s) listed on this application. This approval and photo identification must be carried by the Applicant when on the subject property.
2. An approved Access Permit waiver does not absolve the Applicant of the requirement to obtain a "Special Use Authorization" when seeking to hold certain events or activities on a Department-owned property for groups of 12 or more people, for commercial activities, or for use of a public boat landing. Please check the Department's website (www.dwr.virginia.gov/hunting/regulations/wmarules.pdf) to determine if a Special Use Authorization is required.
3. This waiver is void if the action on the subject property does not conform to the explanation on the application. The waiver may be terminated upon breach of any of the conditions herein or at the discretion of the Department of Wildlife Resources.

☐ By my signature below, I hereby certify that all entries made on this application are true and complete, and I agree and understand that any falsification of information herein, regardless of time of discovery, may result in denial or revocation of my waiver. In addition, I agree to all conditions carried by this waiver.

Applicant

Signature _____ Date _____
(Parent/Guardian if Applicant is under 18 years of age)

TYPED SIGNATURE IS AUTHORIZED AND BINDING PER CODE OF VIRGINIA §59.1, Chapter 42.1, ET SEQ

Approved

Signature _____ Date _____

This waiver is approved subject to the following conditions:

Any questions regarding this application should be directed to:
Virginia Department of Wildlife Resources
Shirl Dressler
(804) 367-6913 or shirl.dressler@dwr.virginia.gov