



California Turtle & Tortoise Club
**DESERT TORTOISE ADOPTION and
 PERMIT APPLICATIONS**

Club Use Only	
Date Received	__/__/____
Date Adopted	__/__/____
ID#/Chapter	_____
CA D of F&W #	_____

PLEASE PRINT

Name _____

Address & Street _____

City _____ Zip Code _____ Telephone: _____

E-mail _____

Residence type: House ; Condo ; Apartment ; Other _____

NOTE: You are completing applications to adopt and permit a desert tortoise (*Gopherus* species). If you wish to adopt another type of turtle/tortoise, please download and complete the [CTTC Adoption Form](#).

What size? Hatchling ; Juvenile ; Adult male ; Adult female (Size of tortoise wanted)

Do you currently have a desert tortoise(s)? If so, please list all:

Have you had a desert tortoise in the past? Yes ; No ; if yes, what happened to it?

Why do you want to adopt a desert tortoise? _____

Are there children in your household? _____ Please list ages _____

Desert tortoises should not be handled any more than necessary and never by young children. Children playing in the yard may disturb a desert tortoise and must be supervised accordingly.

Do you have any dogs? _____ Will the desert tortoise be in the same area? Yes ; No

Many dogs behave well around desert tortoises, but biting and chewing are common instincts dogs have that are dangerous to desert tortoises. Dogs **must not** be left unattended with desert tortoises.

Will the desert tortoise be kept indoors ; or outdoors ?

What size habitat is the area for the desert tortoise (length by width = square feet) _____

Do you have a swimming pool? Yes ; No . If yes, is the pool fenced to prevent a desert tortoise from falling in? Yes ; No

Is your yard completely fenced? Yes ; No ; What kind of fencing? _____

Wooden or chain-link fences should touch the ground to stop a tortoise from digging out. Chain-link fences should have 12 inch high visual barrier secured around the base to prevent a desert tortoise from seeing through and getting caught in the wire.

We recommend there be a permanent barrier across the base of all gate openings. The barrier should be at least 12 inches high so that a desert tortoise cannot see through or climb over. The barrier should remain in place when the gate is open or closed.

Sun, shade, and a safe and dry area for housing and brumation (hibernation) - *if applicable*, for the desert tortoise must be available throughout the year.

Is water available so that a desert tortoise has easy access in and out to bathe and/or drink? Yes No
The container should be in shade and level with the ground. Flat rocks, bricks, etc. placed on the ground will help keep mud out of the dish.

Are growing grasses and weeds available for the tortoise? Yes ; No

Are you aware of the nutritional needs of a desert tortoise? Yes ; No

Have you read through the appropriate care-sheet? Yes ; No

You can find CTTC care sheets and other information online at www.tortoise.org

Do you agree not to use any pesticides, fertilizers or weed killers within reach of the desert tortoise?
Yes ; No

You will need to make arrangements for the care of the desert tortoise while you are away for long periods of time. Also, remember desert tortoises may out live you. Therefore, arrangements for their future care should be considered.

All KNOWN health issues will be disclosed by the Chapter prior to the adoptee receiving the animal. Once the adoptee(s) take physical possession they are responsible for all veterinarian services.

Are you a member of the California Turtle & Tortoise Club? Yes ; No ; If yes, which chapter: _____ . If no would you like to join the Club: Yes ; No
(Members may get priority in the placement of some animals.)

Desert tortoises (*Gopherus* species) placed through the CTTC adoption program may not be sold and must be returned to the CTTC if you are no longer able to care for them. Do you agree? Yes ; No

Please fill out the above application **completely**. Animals are placed in the most suitable homes. You will be notified by e-mail or telephone when a desert tortoise is available. There may be a waiting list.

Signature: _____ **Date:** _____
You must be 18 years or over to adopt a turtle/tortoise.

For more information visit California Turtle & Tortoise club online at www.tortoise.org. You will find e-mail contacts for all Club Chapters where any questions you may have can be answered.

Please mail the signed, completed application to the closest California Turtle & Tortoise Club adoption program or bring it to your nearest chapter meeting.

Chino Valley Chapter

P.O. Box 1753, Chino, CA 91708-1753

Foothill Chapter

P.O. Box 51002, Pasadena, CA 91115-1002

High Desert Chapter

P.O. Box 163, Victorville, CA 92392

Inland Empire Chapter

P.O. Box 2371, San Bernardino, CA 92406

Kern County Chapter

P.O. Box 81772, Bakersfield, CA 93380-1772

Low Desert Chapter

P.O. Box 4156, Palm Desert, CA 92261

Ridgecrest Chapter

600 Weiman Ave., Ridgecrest, CA 93555

Santa Barbara-Ventura Chapter

P.O. Box 3086 Camarillo CA 93011

Santa Clarita Valley Chapter

P.O. Box 4012, Castaic, CA 91310

TOOSLO (San Luis Obispo) Chapter

P.O. Box 14222, San Luis Obispo, CA 93406

Turtle and Tortoise Care Society Chapter

P.O. Box 15965, Long Beach, CA 90815-0965

Valley Chapter

P.O. Box 7364 Van Nuys CA 91409



PERMITTEE COPY

NO FEE

SEE INSTRUCTIONS BELOW BEFORE COMPLETING APPLICATION. TYPE OR PRINT CLEARLY.

FIRST NAME	M.I.	LAST NAME	DAY TELEPHONE ()
MAILING ADDRESS			PRIOR TAG NUMBER (if applicable)
CITY	STATE CA	ZIP CODE	DATE ACQUIRED
PHYSICAL ADDRESS WHERE THIS TORTOISE IS LOCATED, IF DIFFERENT FROM ABOVE			

HOW DID YOU ACQUIRE THIS TORTOISE?

SPECIES	AGE (Select One) <input type="checkbox"/> HATCHLING <input type="checkbox"/> JUVENILE <input type="checkbox"/> ADULT	SEX (Select One) <input type="checkbox"/> M <input type="checkbox"/> F	UNIQUE FEATURE (if Applicable)	HEALTH (Select One) <input type="checkbox"/> POOR <input type="checkbox"/> GOOD <input type="checkbox"/> EXCELLENT
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I certify that all information contained on this application is true and correct. I understand that, in the event this information is found to be untrue or incorrect, the permit issued will be considered invalid and must be surrendered where issued and that I will be subject to criminal prosecution. I declare under penalty of perjury that I lawfully acquired and possess the tortoise listed above.

APPLICANT'S SIGNATURE X	DATE
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FOR CALIFORNIA DEPARTMENT OF FISH AND WILDLIFE USE ONLY PERMIT TO POSSESS DESERT TORTOISE

The person whose name appears above is hereby known as the permittee and is authorized by this permit to possess the tortoise identified herein. The permittee shall attach the tag accompanying this permit to the tortoise and shall not thereafter remove such tag, nor sell, barter, breed, transfer or release this tortoise without prior permission from the Department of Fish and Wildlife.

TAG NUMBER	ISSUED BY	DATE
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IMPORTANT INFORMATION

Breeding of captive tortoises is not authorized by the terms of this permit. If the gender of the tortoise is unknown and you have more than one, you should keep them separated to prevent breeding.

It is illegal to take tortoises from the wild. The penalty for doing so can be up to \$5000 and one year in jail.

If you need assistance in finding a new home for the tortoise, contact the CTTC at www.tortoise.org. No tortoise that has been in possession shall be released into the wild.

INSTRUCTIONS FOR COMPLETING THE DESERT TORTOISE PERMIT APPLICATION

1. It is mandatory to complete the following items for an application package to be accepted. Incomplete application packages will be returned.
 - a. All pages of the application completed in full, signed, and dated.
 - b. A photograph of the desert tortoise to verify species.
 - c. A self-addressed, stamped envelope for processing.
2. Mail the application package to: California Turtle and Tortoise Club
 P.O. Box 1753
 Chino, CA 91708-1753
 Allow 3-4 weeks for processing.
3. If your application is accepted and you receive a tag, maintain the "Permittee Copy" for your records and send the "CDFW copy" to: California Department of Fish and Wildlife
 Attn: Tortoise Permit Coordinator
 P.O. Box 944209
 Sacramento, CA 94244-2090



CDFW COPY

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