



State of Hawaii
Department of Land and Natural Resources
Division of Forestry and Wildlife



SPECIAL INTERIM PERMIT ALLOWING DISABLED HUNTERS TO HUNT
AND TAKE GAME WITH A CROSSBOW ON PUBLIC HUNTING

Permit No.: _____

Date Issued: _____

Date Expires: _____

Eligibility Criteria: A person may obtain a special permit to hunt game with a crossbow if a licensed, practicing physician certifies that the applicant has a physical limitation that prevents them from effectively using regular archery or hunting equipment.

Conditions and Restrictions: (1) Applicants for this special permit must provide proof of disability certified by their physician, along with proof of identity and residence, either through a notarized signature or a photocopy of a valid government-issued photo ID, such as a driver's license; (2) The permit authorizes the holder to use a crossbow instead of standard archery equipment; (3) The permit is non-transferable and may be revoked at any time; (4) Only a crossbow permit holder is permitted to use a crossbow in a public hunting area; (5) The crossbow must have a minimum draw weight of 125 pounds; (6) The crossbow may be cocked and must be on safe while hunting, but the bolt must stay in the quiver until the permit holder is ready to shoot; (7) All requirements of Chapter 122 and 123 apply, except for the use of a crossbow by the permit holder; (8) Anyone violating these permit requirements will violate Chapter 122 or 123, as applicable, and will be subject to the penalties listed in 183D-5 and 183D-12; (9) This certification and permit are valid for four (4) years from the date of certification unless otherwise specified. **This permit authorizes use of a crossbow only. It does not permit hunting during the “disabled” hunting season.** Approved permits are eligible for statewide use. Consult the respective island branch for details on the use of this permit prior to any planned hunt.

Applications can be submitted through an electronic process (Adobe E-sign) or a paper application (email, fax, mailed, in-person) to DLNR Statewide Administrative Branch: dlnr.fw.admin@hawaii.gov | Fax: 808-587-0160 | Address: 1151 Punchbowl St., Rm 325, Honolulu, HI, 96813.

I hereby apply for a Disabled Hunter Permit to hunt with a crossbow in accordance with the above stipulations.

Name _____ Phone No. _____ Date _____

Social Security No. _____ Address _____

City _____ State _____ Zip Code _____

Sex _____ Weight _____ Height _____ Hair Color _____ Eye Color _____

I hereby certify under oath that the above information is true and correct and that I am eligible to obtain this special permit.

Applicant's Signature

Date

**SPECIAL INTERIM PERMIT ALLOWING DISABLED HUNTERS TO HUNT
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PHYSICIAN'S STATEMENT**

PHYSICIAN'S STATEMENT (must be completed and signed by physician)

I hereby certify that _____ is functionally unable to effective use
Applicant
regular hunting or archery equipment due to a physical disability.

Physician Name (print) _____

Phone No. _____ Address _____

City _____ State _____ Zip Code _____

Physician's Signature

Date

The above-named applicant is hereby authorized to hunt and take game with a crossbow on public hunting areas.

Issuing Officer's Signature

Date

Issuing Officer's Title

This Special Interim Permit is issued to qualified individuals, allowing them to take part in the hunting program managed by the Hawaii Department of Land and Natural Resources, Division of Forestry and Wildlife. These reasonable adjustments to policies, practices, and procedures are necessary to prevent discrimination based on disability and will not fundamentally alter the nature of the program or activity.

This permit is provided to comply with the requirements of Part 35.130(a) and § 35.130(b)(7) of Title II of the Americans with Disabilities Act as amended by the final rule published on September 15, 2010.

Original - Licensee
Copy - DOFAW District
Copy - DOFAW Admin
Copy - Fiscal