



FEDERAL FISH AND WILDLIFE PERMIT

1. PERMITTEE

MOSAIC FERTILIZER, LLC
LONESOME MINE OFFICE
P.O. BOX 2000
MULBERRY, FLORIDA 33860-1100

TELEPHONE: 813/634-3922 X 3672
FACSIMILE: 813/634-9763

2. AUTHORITY-STATUTES

16 USC 1539 (a) (1) (A)
16 USC 703-712

REGULATIONS (Attached)

50 CFR §§ 13, 17, & 21

3. NUMBER

TE051429-4

4. RENEWABLE

YES

NO

5. MAY COPY

YES

NO

6. EFFECTIVE

12/14/2009

7. EXPIRES

12/31/2013

8. NAME AND TITLE OF PRINCIPAL OFFICER (if # 1 is a business)

TOM E. MYERS, III, ASSISTANT VICE PRESIDENT-
MINING

9. TYPE OF PERMIT

THREATENED SPECIES

10. LOCATION WHERE AUTHORIZED ACTIVITY MAY BE CONDUCTED

HILLSBOROUGH AND MANATEE COUNTIES, FLORIDA

11. CONDITIONS AND AUTHORIZATIONS:

- A. GENERAL CONDITIONS SET OUT IN SUBPART D OF 50 CFR 13, AND SPECIFIC CONDITIONS CONTAINED IN FEDERAL REGULATIONS CITED IN BLOCK #2 ABOVE, ARE HEREBY MADE A PART OF THIS PERMIT. ALL ACTIVITIES AUTHORIZED HEREIN MUST BE CARRIED OUT IN ACCORD WITH AND FOR THE PURPOSES DESCRIBED IN THE APPLICATION SUBMITTED. CONTINUED VALIDITY, OR RENEWAL, OF THIS PERMIT IS SUBJECT TO COMPLETE AND TIMELY COMPLIANCE WITH ALL APPLICABLE CONDITIONS, INCLUDING THE FILING OF ALL REQUIRED INFORMATION AND REPORTS.
- B. THE VALIDITY OF THIS PERMIT IS ALSO CONDITIONED UPON STRICT OBSERVANCE OF ALL APPLICABLE FOREIGN, STATE, LOCAL OR OTHER FEDERAL LAW.
- C. VALID FOR USE BY LEE WALTON, WILLIAM DAVID GORDON, AND J. STEVE GODLEY.
- D. PERMITTEE IS AUTHORIZED TO TAKE (CAPTURE, BAND, RADIO TAG, TRANSLOCATE) THREATENED FLORIDA SCRUB-JAYS (*Aphelocoma coerulescens*), AS CONDITIONED BELOW:
 - 1. *Aphelocoma coerulescens* MAY BE CAPTURED WITH MIST NETS OR BY NON-HARMFUL BAITED TRAPS. ONLY UNSALTED PEANUTS MAY BE USED, AND IN MODEST AMOUNTS, AS BAIT. PERMITTEE SHALL MINIMIZE DISTURBANCE TO VEGETATION, ESPECIALLY NEAR NESTS, WHEN SETTING UP NETS AND TRAPS.
 - 2. BIRDS MAY BE Banded WITH STANDARD U.S. GEOLOGICAL SURVEY ALUMINUM BANDS AND PLASTIC COLORED BANDS.
 - 3. TRAPS AND MIST NETS MUST BE CONTINUALLY ATTENDED AND NO CAPTURES SHOULD BE LEFT IN TRAPS.
 - 4. ALL *Aphelocoma coerulescens* MUST BE IMMEDIATELY RELEASED AFTER BANDING AND EXAMINATION, IF THEY ARE NOT SELECTED TO BE TRANSLOCATED.

XX BLOCK 11 OF THIS PERMIT CONSISTS OF ITEMS A - N (4 PAGES TOTAL).

12. REPORTING REQUIREMENTS

REPORTS WILL BE PROVIDED TO THE U.S. FISH AND WILDLIFE SERVICE OFFICES APPEARING IN CONDITIONS M AND N OF THIS PERMIT. REPORTING CONTENT, FORMAT, SUFFICIENCY, AND FREQUENCY IS OUTLINED IN CONDITION L OF THIS PERMIT.

ISSUED BY:

TITLE:

Chief, PLANNING AND
PERMITTING, SOUTHEAST REGION

DATE

12/14/2009

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D. CONTINUED.

5. BEFORE ANY COLOR BANDING TAKES PLACE IN ANY COUNTY, THE PERMITTEE SHALL DEVELOP A COORDINATED MARKING SCHEME WHICH SHALL BE APPROVED BY THE USGS PATUXENT WILDLIFE RESEARCH CENTER, BIRD BANDING LABORATORY, 12100 BEECH FOREST ROAD, LAUREL, MARYLAND 20708-4037; BBL@USGS.GOV; TELEPHONE: 301/497-5790.
6. FLORIDA SCRUB-JAYS SELECTED FOR TRANSLOCATION SHALL BE HOUSED IN A 0.46 X 0.61 X 0.91 m CAGE CONSTRUCTED OUT OF ONE-HALF INCH GALVANIZED HARDWARE CLOTH AND FED A DIET OF HIGH PROTEIN DOG FOOD, PEANUTS, AND WATER.
7. CAPTIVE FLORIDA SCRUB-JAYS SHALL BE HOUSED IN ARBITRARY MALE - FEMALE PAIRS UNLESS BREEDING PAIR BONDS ARE ALREADY ESTABLISHED.
8. TRANSLOCATED FLORIDA SCRUB-JAYS SHALL BE HELD IN THE TRANSPORT CAGE OVERNIGHT AND TRANSFERRED AT DAYLIGHT TO HACKING CAGES LOCATED IN RESTORED AREAS OF THE MANATEE WELLFIELD MITIGATION SITE.
9. THE HACKING CAGES SHALL BE CONSTRUCTED OUT OF 0.91 X 0.91 X 0.91 m ONE-HALF INCH GALVANIZED HARDWARE CLOTH PLACED ON A 1.2m PLATFORM CONSTRUCTED OUT OF 4-INCH PVC PIPE.
10. THE CAPTIVES SHALL BE LEFT IN THE HACKING CAGES NO LONGER THAN FOUR TO SIX DAYS.
11. THE FEEDERS SHALL BE PHASED OUT WHEN THE FLORIDA SCRUB-JAYS ARE ACCLIMATED TO THE SITE.
12. MONITORING OF FLORIDA SCRUB-JAYS SHALL CONTINUE WITH DAILY VISITS DURING THE FIRST TWO WEEKS POST-RELEASE AND SHALL REMAIN THROUGH THE SECOND BREEDING SEASON PAST THE LAST TRANSLOCATION TO INSURE ACCLIMATION TO THE SITE.
13. NO MORE THAN TWO 12-METER (39.4-FOOT) MIST NETS PER QUALIFIED PERSON SHOULD BE OPERATIONAL AT ANY TIME.
14. THE HANDS, CLOTHING, AND EQUIPMENT USED, OR IN CONTACT WITH, *Aphelocoma coerulescens* DURING AUTHORIZED ACTIVITIES MUST BE DISINFECTED BETWEEN HANDLING INDIVIDUAL *Aphelocoma coerulescens*. ALCOHOL OR OTHER ANTIVIRAL OR BACTERIAL SOLUTION SHOULD BE USED TO WIPE HANDS, CLOTHING, AND EQUIPMENT THAT CONTACT *Aphelocoma coerulescens*.

E. UP TO 15 FLORIDA SCRUB-JAYS PER YEAR MAY BE OPTIONALLY FITTED WITH RADIO TRANSMITTERS AND TRANSLOCATED AT THE MOSAIC WELLFIELD DURING THE PERIOD OF THIS PERMIT.

1. HIP-PACK HARNESSSES FITTED WITH HALOHIL TRANSMITTERS THAT WEIGH 1.6G., APPROXIMATELY 2% OF THE BODY MASS OF AN ADULT FLORIDA SCRUB-JAY, MAY BE APPLIED DURING THE TRANSFER TO THE HACKING CAGE.
2. ANY RADIO-FITTED FLORIDA SCRUB-JAYS SHALL BE MONITORED DAILY BY PERMITTEE FOR 11 WEEKS.
3. IF TELEMETERED FLORIDA SCRUB-JAYS DO NOT ESTABLISH A TERRITORY IN THE INITIAL 12 WEEK MONITORING PERIOD, THEY MAY BE REFITTED WITH A TRANSMITTER FOR ADDITIONAL OBSERVATION.

F. IT IS ESTIMATED THAT HALF OF THE TRANSLOCATED JAYS WILL REMAIN AT THE MANATEE WELLFIELD SITE; AN UNKNOWN PROPORTION OF THE TRANSLOCATED FLORIDA SCRUB-JAY WILL SURVIVE AND CONTRIBUTE TO THE META POPULATION BY ESTABLISHING TERRITORIES ELSEWHERE,

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F. CONTINUED.

AND THE REMAINDER WILL LIKELY PERISH DURING DISPERSAL. CONDITION D. & E. ARE DESIGNED TO MINIMIZE MORTALITY PROBABILITY. IF 2 MORTALITIES OR INJURIES SHOULD OCCUR, ALL AUTHORIZED COLLECTION ACTIVITIES MUST STOP AND THE PERMITTEE SHALL CONTACT BY THE NEXT WORKDAY, THE U.S. FISH AND WILDLIFE SERVICE FIELD OFFICE NOTED IN CONDITION N.1, BELOW. THE PERMITTEE SHALL ALSO CONTACT THE U.S. FISH AND WILDLIFE SERVICE OFFICE LISTED IN CONDITION M., BELOW. BASED UPON DISCUSSIONS BETWEEN THESE OFFICES, A DECISION WILL BE MADE AS TO WHETHER OR NOT THE AUTHORIZED ACTIVITIES WILL BE ALLOWED TO CONTINUE. A DECISION WILL ALSO BE MADE REGARDING THE DISPOSITION OF ANY INJURED OR KILLED INDIVIDUALS.

- G. THIS PERMIT IS NON-TRANSFERABLE, BUT OTHER QUALIFIED PERSONNEL MAY ASSIST IN THE AUTHORIZED ACTIVITIES, SUBJECT TO THE REQUIREMENTS OF §13.25. ADDITIONALLY, PERMITTEE MUST BE PRESENT ON-SITE AND DIRECTLY SUPERVISING THE WORK OF ANY AGENTS HELD UNDER THIS PERMIT. NOTE THAT THE PERMITTEE IS ULTIMATELY RESPONSIBLE FOR THE BEHAVIOR OF ANY AGENTS. WHEN ANY SUCH ASSISTANCE IS TO BE PROVIDED, THOSE DESIGNATIONS ARE TO BE MADE BY LETTER FROM THE PERMITTEE TO EACH AGENT. THE LETTER(S) MUST IDENTIFY THE SCOPE AND DURATION OF THE ASSISTANCE TO THE PERMITTEE. COPIES OF SUCH LETTERS WILL BE PROVIDED IMMEDIATELY TO THE U.S. FISH AND WILDLIFE SERVICE'S REPORTING ADDRESSES LISTED IN CONDITION M. AND N., BELOW, AS WELL AS A SIGNED STATEMENT FROM THE PERMITTEE WHICH CERTIFIES THE QUALIFICATIONS OF THE AGENT TO PERFORM THE REQUESTED ASSISTANCE.
- H. PERMITTEE MUST CARRY A COPY OF THIS PERMIT AT ALL TIMES WHEN CONDUCTING THE AUTHORIZED ACTIVITIES. SHIPMENTS OF COLLECTED BIOLOGICAL MATERIALS SHOULD ALSO BE ACCOMPANIED BY A COPY OF THIS PERMIT. NOTE THAT THIS PERMIT IS LIMITED TO THE ABOVE ACTIVITIES AND IDENTIFIED SPECIES.
- I. ISSUANCE OF THIS PERMIT DOES NOT CONSTITUTE PERMISSION TO CONDUCT THESE ACTIVITIES ON NATIONAL WILDLIFE REFUGES OR ANY OTHER PUBLIC OR PRIVATE LANDS; SUCH PERMISSION MUST BE OBTAINED SEPARATELY FROM THE APPROPRIATE LANDOWNER OR LAND MANAGER BEFORE BEGINNING THESE AUTHORIZED ACTIVITIES. THIS PERMIT, NEITHER DIRECTLY OR BY IMPLICATION, GRANTS RIGHT OF TRESPASS.
- J. ACCEPTANCE OF THIS PERMIT SERVES AS EVIDENCE THAT THE PERMITTEE AND ITS AUTHORIZED AGENTS UNDERSTAND AND AGREE TO ABIDE BY THE TERMS OF THIS PERMIT AND ALL SECTIONS OF TITLE 50 CODE OF FEDERAL REGULATIONS, PARTS 13 AND 17, PERTINENT TO ISSUED PERMITS. SECTION 11 OF THE ENDANGERED SPECIES ACT OF 1973, AS AMENDED, PROVIDES FOR CIVIL AND CRIMINAL PENALTIES FOR FAILURE TO COMPLY WITH PERMIT CONDITIONS.
- K. UPON LOCATING A DEAD, INJURED, OR SICK *Aphelocoma coerulescens* UNDER CIRCUMSTANCES NOT ADDRESSED IN THIS PERMIT, OR ANY OTHER THREATENED OR ENDANGERED SPECIES, INITIAL NOTIFICATION MUST BE MADE IMMEDIATELY TO THE U.S. FISH AND WILDLIFE SERVICE OFFICE IDENTIFIED IN N., BELOW. NOTIFICATION SHOULD ALSO BE MADE BY THE NEXT WORK DAY TO THE U.S. FISH AND WILDLIFE SERVICE OFFICE IDENTIFIED IN CONDITION M, BELOW. CARE SHOULD BE TAKEN IN HANDLING SICK, INJURED, OR DEAD SPECIMENS TO ENSURE EFFECTIVE TREATMENT OR TO PRESERVE BIOLOGICAL MATERIALS FOR LATER ANALYSIS. IN CONJUNCTION WITH THE CARE OF SICK OR INJURED ENDANGERED OR THREATENED SPECIES, AND THE PRESERVATION OF BIOLOGICAL MATERIALS FROM A DEAD ANIMAL, THE FINDER SHOULD TAKE RESPONSIBLE STEPS TO ENSURE THAT THE SITE IS NOT UNNECESSARILY DISTURBED.
- L. AN ANNUAL REPORT SUMMARIZING THE AUTHORIZED ACTIVITIES MUST BE SUBMITTED BY DECEMBER 31 OF EACH YEAR THIS PERMIT IS VALID. EACH REPORT SHOULD INCLUDE, AT A MINIMUM, EITHER A COMPLETED DATABASE REPORTING FORM, SUPPLIED BY THE RECOVERY COORDINATOR, FOR EACH POPULATION, OR THE FOLLOWING INFORMATION:

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L. CONTINUED...

1. LOCATIONS OF THE BANDING. LOCATIONS SHALL BE NOTED USING FIGURES, MAPS, AND BY REFERENCING A COMMON COORDINATE SYSTEM (E.G., LATITUDE LONGITUDE, UNIVERSAL TRANSVERSE MERCATOR SYSTEM, ETC.).
2. SAMPLING METHODOLOGY. INCLUDE A DESCRIPTION OF AREA SAMPLED, NOTING BIOTIC AND ABIOTIC FEATURES THAT MIGHT INFLUENCE SAMPLE COMPOSITION.
3. SPECIES ABUNDANCE AND RICHNESS AT EACH SAMPLE EVENT, INCLUDING PARAMETERS DESCRIBING SAMPLING EFFORT.
4. THE RESULTS OF THE SAMPLING AND CAVITY AUGMENTATION, WITH DISCUSSIONS AND INTERPRETATIONS OF THE DATA IN CONTEXT TO RECOVERY OF THE SPECIES.
5. THE NUMBER AND CONDITION OF BANDED AND TRANSLOCATED *Aphelocoma coerulescens*.
6. COPIES OF ALL PUBLISHED PAPERS AND REPORTS.

M. FOR PURPOSES OF MONITORING COMPLIANCE AND ADMINISTRATION OF THE TERMS AND CONDITIONS OF THIS PERMIT, THE CONTACT OFFICE OF THE U.S. FISH AND WILDLIFE SERVICE IS:

U.S. FISH AND WILDLIFE SERVICE
ATTN: PERMIT COORDINATOR
1875 CENTURY BOULEVARD, SUITE 200
ATLANTA, GEORGIA 30345-3301
TELEPHONE: 404/679-7313
FACSIMILE: 404/679-7081

N. COPIES OF ANNUAL REPORTS SHALL ALSO BE SENT TO THE FOLLOWING:

FIELD SUPERVISOR
U.S. FISH AND WILDLIFE SERVICE
7915 BAYMEADOWS WAY, SUITE 200
JACKSONVILLE, FLORIDA 32256-7517
TELEPHONE: 904/731-3093
FACSIMILE: 904/731-3048

END