LINDISFARNE NATIONAL NATURE RESERVE SEASONAL WILDFOWLING PERMIT

PUNT APPLICATION FORM FOR 2026/27 SEASON

IMPORTANT:
Before applying for a permit, please confirm that you have read the restrictions & conditions, checked the permit types and fees and where to send your application.

Yes ☐

Please read the notes below before completing this form. You must complete all sections in full, clearly and using **BLOCK CAPITALS.**

1. **Full name:** _____
2. **Address:** _____

   _____ **Post code:** _____
3. **Email address:** _____
4. **Your contact number:** _____
5. **Emergency contact details (name/contact number):** _____
6. **Are you a previous permit holder under this or any other Lindisfarne National Nature Reserve scheme?** **YES ☐ NO ☐**
7. **Have you ever been convicted of an offence under the Wildlife and Countryside Act 1981, the Firearms Act 1968, the Game Act 1831 or the Game Licences Act 1860 or any legislation updating those statutes from time to time in force, or The Lindisfarne National Nature Reserve Bylaws dated 27/5/99 (Note: You are not obliged to provide information about convictions, which are spent under the Rehabilitation of Offenders Act 1974)**
   If yes, please provide details on a separate sheet signed and dated by yourself.

   YES ☐ NO ☐
8. **Third Party Insurance cover of not less than £5 million is a requirement for wildfowling on Lindisfarne.**
   Please give details of your insurer and enclose a copy of your insurance certificate.

   Organisation name: _____

   Membership/policy number: _____
9. **Have you read the permit restrictions and conditions, and read and signed the declaration?** **YES ☐ NO ☐**
10. **Are you aware of which species are lawful quarry under the Wildlife and Countryside Act 1981?** **YES ☐ NO ☐**

Permit requested (please tick):

☐ **£86** For a full season permit **(only eligible if applicant has previously taken a permit at Lindisfarne).**

☐ **£101** For a NEW full season permit **(includes £15 new permit induction fee - T&C's apply).**

☐ **£76** For a full season permit for Holy Island residents **(only eligible if applicant has previously taken a permit at Lindisfarne).**

☐ **£91** For a NEW full season permit for Holy Island residents **(includes £15 new permit induction fee - T&C's apply).**

LINDISFARNE NNR WILDFOWLING PERMIT PAYMENT 2026/27

Dear Sir/Madam,

If you would like to make payment for the coming season by card (debit/credit) or by online bank transfer (BACS), Natural England is able to offer this facility. Alternatively, if you wish to pay by cheque, please follow the instructions on page 3.

To maintain a track on your payment, please complete the below and include it with your application, which can either be posted or emailed - see page 3 for details.

To pay by online bank transfer (BACS):

Please pay:

Business Account, Natural England, Sort Code **60-70-80**, Account no **10026630**

Quote payment reference: **LINDISFARNE**

Proceed to complete the following:

I have paid £..... (amount) by BACS on ...../...../..... (date).

or

To pay by card over the phone:

Please ring SSCL Call Centre on **01633 631 800** (office hours: 0900hrs – 1630hrs, Monday - Friday).
Calls are charged at the standard local rate. Please check with your network provider.

1. Tell the adviser the payment is for a '***Lindisfarne Permit***'.
2. Confirm the amount you need to pay (see page 1).
3. The adviser will take a credit/debit card payment over the phone and will ask you for some contact information.
4. Please make note of the adviser's name.
5. Please remember to ask for the payment reference.

Proceed to complete the following:

I have paid £.....(amount) by credit/debit card on ...../...../..... (date).

I spoke to ..... (name).

Payment reference: ..... (15-digit number).

LINDISFARNE NATIONAL NATURE RESERVE SEASONAL WILDFOWLING PERMIT

APPLICATION FORM FOR 2026/27 SEASON

Declaration

To the best of my knowledge, all information provided on this application form is correct at the time of writing.

I freely consent to the processing by the Lindisfarne Wildfowling Management Group (LWMG), BASC and Natural England (NE) of any personal data which they may collect in connection with my application and the permit scheme to which it relates.

Personal data is not disclosed or shared with any third parties and will be processed and stored in accordance with the Data Protection Act 2018.

I agree to indemnify NE and relevant landowners against all actions, claims or costs arising out of the exercise of the rights granted under this permit.

I have read and agree to abide by the 'Terms and Conditions' of the permit and any alterations or amendments to them.

I agree to abide by the decision of the LWMG with regard to my Permit.

To pay by BACS or to make a card payment, please complete page 2 where applicable and follow the instructions.

Alternatively, enclose a cheque made payable to "**Natural England**" for the above-mentioned sum.

Signature: _____ **Date**: _____

Send your application **AFTER 1st August 2026**, but not before, to:

Lindisfarne Wildfowling Warden,
Lindisfarne NNR office,
Beal Station,
Beal,
Berwick-upon-Tweed,
TD15 2PB.

Or

Email it to Shaun McWilliams: shaun.mcwilliams@basc.org.uk *(if paid by BACS or card)*

(You DO NOT need to enclose a stamped address envelope).

Thank you.

Punt gunning date request(s)

Each request is to a maximum of two (2) (back-to-back days ONLY), or a single (1) day. Additional requests (replicating the above stipulations) will only be confirmed after all punt gunning permit holders have been allocated up to two (2) dates. Additional requests will also follow the order of the Lindisfarne Punt Gunning rota.

Either the Wildfowling Warden or BASC Wildfowling Advisor will confirm your punt gunning date(s) with you upon receipt of all punt gunning permit application(s).

Example*	***Monday 4th November***	***Tuesday 5th November***
1st choice		
2nd choice		
3rd choice		
4th choice		
5th choice		