

Veteran's License & Pass Application



THANK YOU FOR YOUR SERVICE TO OUR COUNTRY

Colorado Parks and Wildlife offers a free Independence Parks Pass, free Veteran's Lifetime Combination Small Game Hunting/Fishing License (VA Combo License), and free Veteran's Fishing License (VA Fishing License) to qualifying Colorado residents who are honorably-discharged veterans with disabilities.

PLEASE FILL OUT THIS FORM IN ITS ENTIRETY TO EXPEDITE YOUR REQUEST:

Residency Proof: *the below are required to prove Colorado residency for this program*

- Applicant has lived in Colorado for at least six (6) consecutive months immediately prior to the date of application **AND**
- Applicant has a valid Colorado driver's license or Colorado state ID.

For faster processing, submit application and documentation to:
disability.apps@state.co.us
OR mail to:
 Colorado Parks and Wildlife
 Attn: VA Program
 6060 Broadway
 Denver, CO 80216

Service-Connected Disability Proof and Products:

Please select your proof of honorable discharge and service-connected disability and, based on that proof, select the product(s) you would like to obtain. Different documentation qualifies the applicant for different products. If you have more than one rating, the combined rating must equal or be greater than the listed percentage.

- VA Fishing or Combo License (CRS 33-4-104)**
(To qualify for the combo license you must provide a copy of your hunter education certificate or card unless you were born before 1/1/1949)
 - VA letter showing the applicant is receiving compensation for a **60% or greater** service-connected disability, **OR**
 - Purple Heart Certificate or DD214 showing a Purple Heart Award *(Note: The Purple Heart Medal itself is not proof of the award)*
- Independence Pass (CRS 33-12-106)**
 - VA letter showing the applicant is receiving compensation for a **50% or greater** service-connected disability, **OR**
 - VA letter showing the applicant is receiving compensation for the loss of use of one or both feet or hands, **OR**
 - VA letter showing the applicant is receiving compensation for the permanent loss of vision in both eyes, **OR**
 - Purple Heart Certificate or DD214 showing a Purple Heart Award *(Note: The Purple Heart Medal itself is not proof of the award)*

Without proper documentation, we will be unable to process your application. Please be sure to fill out the application legibly and completely. Any missing information will delay processing of your request and may result in your application being denied.

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|---|-----------------------------------|-------------------|------------------------|---------------------------------|
| CID | Legal First Name | Legal Middle Name | Legal Last Name | |
| | | | | |
| Date of Birth | Phone | Email | | |
| | | | | |
| Physical Address | | | City | State Zip |
| | | | | CO |
| Mailing Address (if different than above) | | | | |
| | | | | |
| Ethnicity | Gender | Height | Weight | Hair Color Eye Color |
| | | | | |
| Colorado Driver's License or ID # | Month & Year Started Living in CO | | Social Security Number | Hunter Education Number & State |
| | Month _____ Year _____ | | | |

I certify that the information provided on this application and any provided documentation is true and accurate. I hereby authorize Colorado Parks and Wildlife to make further inquiries to verify information submitted on this application. I understand that any false statements made will void my license and/or pass and may result in criminal charges.

Signature of Applicant _____ Date _____