



CERTIFIED DEER TRACKING DOG PERMIT APPLICATION

Permit Application Fee: \$2.00

Name of Dog Handler: _____
Address: _____
City: _____
Email: _____
Day Phone: _____ Home Phone: _____
Date of Birth: _____ Social Security Number: _____
Conservation Identification Number (CID#): _____

Tracking Dog Information

First Dog

Dog Name: _____ Sex: _____
Breed: _____ Date of Birth: _____
Physical Description (i.e., color, distinctive markings): _____

Microchip Number: _____
Certification Number (i.e. UBT-1): _____ Date of Certification: _____
Certifying Organization: _____
A photograph of the dog must be provided.

Second Dog

Dog Name: _____ Sex: _____
Breed: _____ Date of Birth: _____
Physical Description (i.e., color, distinctive markings): _____

Microchip Number: _____
Certification Number (i.e. UBT-1): _____ Date of Certification: _____
Certifying Organization: _____
A photograph of the dog must be provided.

Do you wish to be published on NJFW's website so that hunters know whom they can call? ☐ Yes ☐ No

If yes, which counties? _____

I hereby certify that the above information is true and correct to the best of my knowledge and belief. I have read and understand the regulations and policies of the Certified Deer Tracking Dog Permit. I acknowledge that if the information is false, or if I fail to follow the regulations and policies of the permit, I am subject to the fines and penalties allowed by law.

Signature of Applicant: _____ **Date:** _____

Submit application, fees (check or money order made payable to New Jersey Fish & Wildlife), and supporting documents to:

**New Jersey Fish & Wildlife
Wildlife Permits Unit
Mail Code 501-03, PO Box 420
Trenton, NJ 08625-0420**

For information, visit http://www.njfishandwildlife.com/deer_trackingdog.htm.