



NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION

FISH AND WILDLIFE

Bureau of Freshwater Fisheries

P.O. Box 420 Trenton, NJ 08625-0420

Phone: (609) 984-0530 Fax: (609) 984-1414



FROG HARVEST REPORT FORM

ALL ITEMS MUST BE COMPLETED. (PLEASE PRINT OR TYPE)

REPORT MUST BE SUBMITTED TO THE ADDRESS ABOVE BY THE 10<sup>TH</sup> OF THE MONTH FOLLOWING HARVEST  
OR MAY BE EMAILED TO [KRISTA.LAWS@DEP.NJ.GOV](mailto:KRISTA.LAWS@DEP.NJ.GOV)

PERMIT NO.	NAME OF PERMITTEE	REPORT MONTH	REPORTING YEAR	OFFICIAL USE
WATERBODY (one waterbody per form)				DATE RECEIVED:
DAY OF THE MONTH	NUMBER OF FROGS HARVESTED	PURCHASER INFORMATION* NAME , ADDRESS, PHONE #		SPECIES AND # OF FROGS RELEASED
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

DAY OF THE MONTH	NUMBER OF FROGS HARVESTED	PURCHASER INFORMATION* NAME , ADDRESS, PHONE #	SPECIES AND # OF FROGS RELEASED
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			
<b>TOTAL NUMBER OF FROGS TAKEN FOR THE WATERBODY FOR THE MONTH</b>			
<b>I CERTIFY UNDER PENALTY OF LAW THAT THE INFORMATION PROVIDED IN THIS DOCUMENT IS TRUE, ACCURATE AND COMPLETE.</b>			
_____		_____	
<b>DATE</b>		<b>SIGNATURE OF PERMITEE</b>	

\* In accordance with N.J.A.C. 7:25-6.22, please indicate name, address and phone number of individual or business that purchased the turtles harvested.

**An individual Harvest Report Form must be completed for each waterbody for each month covered by your FROG Commercial Harvest Permit.**

**REV 6/2022**