



State of New Jersey
Department of Environmental Protection
Division of Fish and Wildlife
Captive Game Permits
26 Route 173 West
Hampton NJ 08827

COMMERCIAL PRESERVE LICENSE APPLICATION FORM

Name of Club or Organization: _____
Contact Person: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Email: _____
Day Phone: _____ Home Phone: _____
Date of Birth: _____ Social Security #: _____
Email Address: _____

Number of birds to be released:
_____ Pheasants _____ Quail _____ Chukar Partridge
_____ Hungarian Partridge _____ Mallards _____ Total Birds: _____

Bird Supplier Permit Number: _____

Please send _____ # of tags @ \$.15 ea. Total tag amount \$ _____

Number of non-contiguous properties held under this license: _____
Total acreage of properties on this license: _____

Tract Information:

First Tract

Location of main preserve: _____
Township: _____ County: _____ Number of Acres: _____
Block and lot numbers: _____
Description of boundaries: _____
Was this property previously hunted? Yes _____ No _____
For how many years was this property previously hunted? 1-5 _____ 6-10 _____ >10 _____ n/a _____
Please check one: Owner _____ Lease holder _____
Name of Property Owner/Lessor: _____
Mailing Address of Owner: _____
Telephone Number of Owner: _____

Additional Tract

Preserve location _____
Township: _____ County: _____ Number of Acres: _____
Block and lot numbers: _____
Description of boundaries: _____
Was this property previously hunted? Yes _____ No _____
For how many years was this property previously hunted? 1-5 _____ 6-10 _____ >10 _____ n/a _____
Please check one: Owner _____ Lease holder _____
Name of Property Owner/Lessor: _____

Mailing Address of Owner: _____
Telephone Number of Owner: _____

Additional Tract

Location _____
Township: _____ County: _____ Number of Acres: _____
Block and lot numbers: _____
Description of boundaries: _____
Was this property previously hunted? Yes _____ No _____
For how many years was this property previously hunted? 1-5 _____ 6-10 _____ >10 _____ n/a _____
Please check one: Owner _____ Lease holder _____
Name of Property Owner/Lessor: _____
Mailing Address of Owner: _____
Telephone Number of Owner: _____

**IF YOU ARE IMPORTING GAME BIRDS FROM OUT-OF-STATE,
PLEASE COMPLETE THIS SECTION:**

REQUESTS TO IMPORT

AMOUNT _____ ***SPECIES (Live):*** _____
AMOUNT _____ ***SPECIES (Live):*** _____

IMPORTED FROM:

Contact Name / Business: _____
Street: _____
City: _____ State: _____ Zip: _____
Phone: _____

NPIP Number: _____ **Dealer's Permit Number:** _____

Delivery will be made on:

DATE/DATES: _____

Name of Carrier: _____

All game birds transported or otherwise moved into New Jersey must be accompanied by documentation providing proof that the birds originate from an NPIP facility that monitors for Avian Influenza, Pullorum-Typhoid - or a USDA VS 9-3 providing proof of the same. Importations are also subject to local, municipal, state and federal regulations including, but not limited to, requirements established by the USFWS, USDA AND NJDA

Signature

Date

I have enclosed with the application, the following information:

_____ Contract for birds or captive game permit #
_____ Lease agreement (if applicable)

_____ Two photocopies 8 ½"x11" or 11"x17" of tax maps for each tract of land. Mark buildings and safety zones in red.

_____ Importation application (if applicable)

Please send _____ # of 1-day license books at \$230.00 each = \$_____ total for 1-day licenses.

I certify that I have read the enclosed information, and agree to follow the regulations and policies of the Commercial Preserve license. The application/information is correct, and the required number of birds will be liberated between September 1 and May 1.

Date: _____ Signature of Applicant: _____

Make check/money order payable to: NJ DEP Division of Fish and Wildlife

Submit applications, fees and supporting documents to:
NJ DEP, Division of Fish and Wildlife, Captive Game Permits, 26 Route 173 West, Hampton NJ 08827