



CERTIFIED DEER TRACKING DOG PERMIT APPLICATION

Permit Application Fee: \$2.00

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

Tracking Dog Information:

First Dog

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

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

Second Dog

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

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

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 provided 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 applications, fees (check or money order made payable to NJ Division of Fish and Wildlife), and supporting documents to:

NJ Division of Fish and Wildlife, 2201 County Route 631, Woodbine, NJ 08270.

For information visit www.njfishandwildlife.com/deer_trackingdog.htm.