



NEW JERSEY DIVISION OF FISH AND WILDLIFE

Bureau of Freshwater Fisheries

Mail Code 501-03, PO Box 420, Trenton, NJ 08625-0420

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



SNAPPING TURTLE HARVEST REPORT FORM

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

**REPORT MUST BE SUBMITTED TO THE ADDRESS ABOVE BY THE 10TH OF THE MONTH FOLLOWING HARVEST
OR MAY BE EMAILED TO KRISTA.MOSER@DEP.NJ.GOV**

PERMIT NO.		REPORT MONTH		YEAR	NAME OF PERMITTEE	OFFICIAL USE
WATERBODY (one waterbody per form)						DATE RECEIVED:
DAY OF THE MONTH	HARVESTED SNAPPING TURTLES		RELEASED SNAPPING TURTLES		PURCHASER INFORMATION* NAME , ADDRESS, PHONE #	OTHER TURTLE SPECIES RELEASED SPECIES (No.)
	NUMBER >12 inch	TOTAL WEIGHT (lbs) >12 inch	NUMBER >12 inch	NUMBER <12 inch		
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						

DAY OF THE MONTH	HARVESTED SNAPPING TURTLES		RELEASED SNAPPING TURTLES		PURCHASER INFORMATION* NAME , ADDRESS, PHONE #	OTHER TURTLE SPECIES RELEASED SPECIES (No.)
	NUMBER >12 inch	TOTAL WEIGHT (lbs) >12 inch	NUMBER >12 inch	NUMBER <12 inch		
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						
			TOTAL NUMBER OF TURTLES <u>HARVESTED</u> FOR THE WATERBODY FOR THE MONTH			

I CERTIFY UNDER PENALTY OF LAW THAT THE INFORMATION PROVIDED IN THIS DOCUMENT IS TRUE, ACCURATE, AND COMPLETE.

DATE

SIGNATURE OF PERMITTEE

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