REPORT OF SPECIAL HUNTING PERMIT SALES

State Form 56074 (R2 / 1-24)

INDIANA STATE BOARD OF ANIMAL HEALTH
OFFICE OF THE STATE VETERINARIAN
Discovery Hall, Suite 100
1202 East 38th Street
Indianapolis, IN 46205
Telephone number: 317-544-2400
Fax number: 317-974-2011
E-mail: CervidRecords@boah.IN.gov

INSTRUCTIONS:
1. *Please print clearly in ink.*
2. *Return to the Indiana State Board of Animal Health.*
3. *Make checks payable to: "State of Indiana".*
4. *Due date is the 10th of the following month.*
5. *Use additional forms if necessary.*

Hunting preserves authorized by the Indiana State Board of Animal Health to sell special hunting permits should use this form to report sales of permits and remit collected permit fees to the state per Indiana Code 15-17-14.7-9.

This Report is for the Following Month: _____, 20 _____.

The following licensed hunting preserve prepared this Report and certifies by signing below that the information contained in the Report is complete and accurate:

Printed name of hunting preserve owner		
Name of licensed hunting preserve		
National premises identification number 0 0 _____ _____ _____ _____ _____		
Signature of person preparing the report		Date signed *(month, day, year)*
Printed name	Title	Telephone number

☐ I certify that **NO** special hunting permits were sold in the month reported above *(if applicable)*.

Record of Special Hunting Permit Sales: *Record the following information for each special hunting permit sold.*

Date Sold *(mm/dd/yy)*	Permit Number	Type of Special Hunting Permit *(One line per permit.)* *(Check one box for each permit.)*	Fee Collected
		☐ Cervid Male ☐ Cervid Female, Sheep, Goat	
		☐ Cervid Male ☐ Cervid Female, Sheep, Goat	
		☐ Cervid Male ☐ Cervid Female, Sheep, Goat	
		☐ Cervid Male ☐ Cervid Female, Sheep, Goat	
		☐ Cervid Male ☐ Cervid Female, Sheep, Goat	
		☐ Cervid Male ☐ Cervid Female, Sheep, Goat	
		☐ Cervid Male ☐ Cervid Female, Sheep, Goat	
		☐ Cervid Male ☐ Cervid Female, Sheep, Goat	
		☐ Cervid Male ☐ Cervid Female, Sheep, Goat	
		☐ Cervid Male ☐ Cervid Female, Sheep, Goat	
		☐ Cervid Male ☐ Cervid Female, Sheep, Goat	
		☐ Cervid Male ☐ Cervid Female, Sheep, Goat	

Date Sold *(mm/dd/yy)*	Permit Number	Type of Special Hunting Permit *(One line per permit.)* *(Check one box for each permit.)*	Fee Collected
		☐ Cervid Male ☐ Cervid Female, Sheep, Goat	
		☐ Cervid Male ☐ Cervid Female, Sheep, Goat	
		☐ Cervid Male ☐ Cervid Female, Sheep, Goat	
		☐ Cervid Male ☐ Cervid Female, Sheep, Goat	
		☐ Cervid Male ☐ Cervid Female, Sheep, Goat	
		☐ Cervid Male ☐ Cervid Female, Sheep, Goat	
		☐ Cervid Male ☐ Cervid Female, Sheep, Goat	
		☐ Cervid Male ☐ Cervid Female, Sheep, Goat	
		☐ Cervid Male ☐ Cervid Female, Sheep, Goat	
		☐ Cervid Male ☐ Cervid Female, Sheep, Goat	
	Total Fees Collected from Hunters:		
	Total Amount Remitted with this form:		