

LICENSE # ISSUED TO THIS APPLICANT

LA DEPT OF WILDLIFE AND FISHERIES ALLIGATOR HUNTER LICENSE APPLICATION FORM



		PIC	KUP OFF	FICE: Circ	cle one offic	e for picku	ıp below			
Baton Rouge	Bourg	Lake Charles	Lafayette	e Mi	inden	Monroe	New Orleans	Alexandria/Pineville	Rockefeller	
SSN:		NAME:			ADDRE	:SS:				
:ITY:		STATE:ZIP:		PHONE:			BIRTHDATE:			
ORIVER'S LIC	ENSE #:		STA	TE:	RACE:	S	EX:C	OLOR HAIR:		
COLOR EYES:	i	_HEIGHT:f	t_in W	EIGHT:_	*HUN	TER SAF	ETY#:			
before September 1,	1969 and who ha	as a valid hunting licens	se or 2) who is	s at least 18 ye	ears old and has	successfully c	ompleted an approv	ct supervision of a person: ed hunter education course	•	
I W	VISH TO A	PPLY FOR A L	ICENSE	TO TAK	KE ALLIGA	TORS O	N THE FOLI	LOWING PROPE	RTY	
LANDOW	NER NAME	:								
ADDRESS:		CITY:					STATE:			
ZIP:	F	HONE #:E-MAIL:								
		To be completed by Landowner/Land Manager ONLY								
		SIGNA	ATURE OF	LANDOWNE	ER/LAND MAN	IAGER	DA	TE		
			DESCR	IPTION C	F AREA TO	BE HUN	TED			
TOTAL AC	PARISH:									
THIS ACR	EAGE WAS	S/WAS NOT (CI	RCLE ON	IE) HUNT	ED LAST Y	EAR BY		(H	UNTER)	
CONTAIN	ING PARIS	H, TOWNSHIP,	RANGE,	SECTION	AND ACRE	EAGE INF	ORMATION A	IPTS OR BILL OF AND 2) A MAP OU SE MAY BE SUBM	TLINING	
	SIGNATURE OF APPLICA			NT DATE				APPLICANT'S E-MAIL ADDRESS		
		ALL THE ABOVE RI					Y FALSIFICATIO	N OF THIS INFORMAT	ION SHALL	
***	******	*******	*****DO	NOT WR	ITE BELOW	/ THIS LIN	VE******	********	***	
PORTIO	N ACRES	S HABITAT	TYPE	RATIO	PARISH	#TAGS	SISSUED	BEG TAG # E	ND TAG #	
1) 2) 3) 4) 5) 6) 7)										