

Attachment 1  
ALLIGATOR NEST SURVEY

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**Application #:** \_\_\_\_\_ **Property Name:** \_\_\_\_\_

**Survey Method:**        **Helicopter**                       **Airplane**                       **Ground**

For Ground Surveys only, please briefly describe the method used (e.g., airboat, walking): \_\_\_\_\_

**Date:** \_\_\_\_\_ **Pilot Name:** \_\_\_\_\_ **Observer Name:** \_\_\_\_\_

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**INSTRUCTIONS:** Please complete the information below while conducting alligator nest surveys. Below, 'R' denotes a required field.

Nest Number	Nest Status <sup>1</sup> (D, F)	Location <sup>R</sup> 00°00'00.00"N 00°00'00.00"W	Comments

<sup>1</sup>Include nest status if observed during survey: D=DEPREDATED, F=FLOODED

It is the responsibility of the Certified Wildlife Biologist or Commission-Approved Observer listed below to ensure that all required fields are complete and returned to FWC Alligator Management Program before August 1 of the egg collection year.

The above survey was conducted by a Certified Wildlife Biologist or a Commission-Approved Observer and the information is accurate and complete.

(Please print) \_\_\_\_\_ (Signature) \_\_\_\_\_ (Date) \_\_\_\_\_