Background Report
Form FWC 1000PW
Agenda Item 4D
February 12, 2014

ALLIGATOR MANAGEMENT PROGRAM APPLICATION

1515 E. Silver Springs Blvd., Suite 106, Ocala, FL 34470

Submit applications at least 60 days prior to the opening of the harvest period to ensure timely issuance of permits.

(Please circle number of ADDRESS CHANGE from previous year)

1. Applicant: Name (last name first) _____
   Social Security Number* _____ Date of Birth _____
   Mailing Address _____
   Street Address (if different) _____
   City _____ State _____ Zip Code _____
   Home phone number (___) _____ Work phone number (___) _____
   FAX (___) _____ E-mail address _____

2. PROPERTY NAME _____
   Property Owner Name _____
   Mailing Address _____
   City _____ State _____ Zip Code _____
   Home phone number (___) _____ Work phone number (___) _____
   FAX (___) _____ E-mail address _____

If a designee for non-hatchling alligator harvest is requested, complete section 3 below. If **NO designee** is indicated, the applicant will be the non-hatchling harvest permittee.

3. Non-hatchling harvest designee: Name (last name first) _____
   Social Security Number* _____ Date of Birth _____
   Mailing Address _____
   Street Address (if different) _____
   City _____ State _____ Zip Code _____
   Home phone number (___) _____ Work phone number (___) _____
   FAX (___) _____ E-mail address _____

If you do not wish to collect eggs or hatchlings, skip sections 4 and 5 below. Designees may collect eggs (a nest survey, Attachment 1, is due by August 1) and hatchlings (a pod survey, Attachment 2, is due by November 1) after issuance and receipt of harvest permits. Complete sections 4 and 5 below if designees for egg and hatchling collections are requested. If **NO designees** are indicated, the applicant will be the egg and hatchling harvest permittee.

4. Egg harvest designee: Name (last name first) _____
   Social Security Number* _____ Date of Birth _____
   Mailing Address _____
   Street Address (if different) _____
   City _____ State _____ Zip Code _____
   Home phone number (___) _____ Work phone number (___) _____
   FAX (___) _____ E-mail address _____

5. Hatchling harvest designee: Name (last name first) _____
   Social Security Number* _____ Date of Birth _____
   Mailing Address _____
   Street Address (if different) _____
   City _____ State _____ Zip Code _____
   Home phone number (___) _____ Work phone number (___) _____
   FAX (___) _____ E-mail address _____

6. Provide a legal description of the property including the county(ies) in which the property is located, and provide an 8 1/2 by 11 inch map, such as a DOT county map, that accurately delineates the property boundary and shows the location of the property within the county(ies) if these items have not been submitted previously. If the property boundary includes adjoining properties under different ownership, indicate the name of the owner on each parcel. For our record keeping purposes, please provide the total acreage of the property for which you are applying _____. GPS coordinates of access point _____

---

* Social Security Number is required under section 379.352(3), Florida Statutes and will be used for the purpose of administration of the Title IV-D program for child support enforcement.

7. If you submitted an alligator population survey last year and you returned any of your tags unused you may request a harvest quota equal to the number of unused tags returned for this property. This option may only be used if you have not already requested a harvest quota under any of the provisions below. Indicate how many tags you returned last year for this property _____.

8. If you are requesting a quota based on habitat inventories, submit an alligator habitat map and an alligator habitat inventory form (Attachment 3)*, if not previously submitted. If you have previously submitted a map and inventory form and the alligator habitat delineated and described on the map and form have not changed, initial here _____. New applicants for previously permitted properties must submit newly verified habitat inventories and non-hatchling alligator surveys as specified in Rule 68A-25.032(1), F.A.C.

9. To request a non-hatchling alligator harvest quota based on a habitat inventory, check here ____.

10. To request a non-hatchling alligator harvest quota based on population surveys, submit a population survey. Only one such request may be submitted each calendar year.

11. To request an average harvest quota, check here ____ and ask your wildlife biologist to submit a Certification of Comparable Surveys.

12. If you would like the non-hatchling harvest designee's name, address, and phone number distributed to individuals interested in participating in guided alligator hunts, check here ____.

13. Please read the following statements carefully and provide the appropriate signatures. If you are both the landowner and the applicant, provide a signature for both statements. If applying to establish an alligator management program on public lands, the agency representative who is authorized to make application on behalf of the government body with management authority over the property described in the application must sign as the "Landowner."

I certify that the above information is correct. The boundary map (required in section 6 above) and, if required, the alligator habitat inventory and alligator habitat map submitted as part of this application or on file with the Commission accurately represent the property specifically described under section 6 above. I understand that, if after review of this application and any other information that the Commission may deem appropriate, the Commission determines that there is a conflict or question as to whether properties identified under section 6 of this application, or any part thereof, include sovereign waters of the state, the applicant may be asked to submit additional information to verify that those properties are eligible for the program. I understand that if the Commission determines that there is a conflict about ownership of subject alligator habitat parcels, it reserves the right to request additional proof of ownership, such as deeds, surveys, land patents, and sovereign lands determinations to substantiate the application. I understand that failure to submit such information may result in denial of the application.

Applicant's Signature_____ Date_____

I certify that the information provided under section 6 of this application is correct. I verify that there are no pending legal disputes regarding the boundary or ownership of the property proposed for alligator harvest and that the lands described under section 6 above that are identified as mine are under my lawful ownership or control. I also hereby authorize the above named applicant and designees to apply for alligator harvest permits on the lands identified under section 6 above. If you authorize the above named applicant to combine this property with any contiguous adjacent properties, please provide your initials here _____.

_____

Landowner's Name/Representative's Name & Title Signature Date
(Please Print)

Any natural resource professional certified by an appropriate professional organization as specified in Rule 68A-25.032(1)(b), F.A.C., may verify alligator habitat inventories, but only persons meeting the certification requirements of **The Wildlife Society** as specified in Rule 68A-25.032(1)(b), F.A.C., may verify alligator, nest, and hatchling pod surveys. Note that it is not feasible to have Commission biologists monitor alligator populations and tailor harvests to a specific property. The Commission recommends that the applicant and landowner consult with a professional biologist, such as a certified biologist, to ensure that their harvest objectives are met and that alligator populations on their lands are not negatively impacted.