



**NEW JERSEY DIVISION OF FISH AND WILDLIFE**

**Bureau of Freshwater Fisheries**

**P.O. Box 394 Lebanon, NJ 08833**

**Phone: (908) 236-2118 Fax: (908) 236-7280**



**COMMERCIAL HARVEST REPORT FORM**

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

**REPORT MUST BE SUBMITTED TO THE ADDRESS ABOVE BY THE 10<sup>TH</sup> OF THE MONTH FOLLOWING HARVEST**

<b>PERMIT NO.</b>		<b>NAME OF PERMITEE</b>		<b>OFFICIAL USE ONLY</b>  <b>DATE RECEIVED:</b>
<b>WATERBODY</b>				
<b>MONTH AND YEAR OF REPORT</b>		<b>TURTLE SPECIES</b>		
<b>DAY OF THE MONTH</b>	<b>NUMBER OF TURTLES TAKEN</b>	<b>DAY OF THE MONTH</b>	<b>NUMBER OF TURTLES TAKEN</b>	
1		16		
2		17		
3		18		
4		19		
5		20		
6		21		
7		22		
8		23		
9		24		
10		25		
11		26		
12		27		
13		28		
14		29		
15		30		
		31		
<b>TOTAL NUMBER OF TURTLES TAKEN</b>				
<b>I CERTIFY UNDER PENALTY OF LAW THAT THE INFORMATION PROVIDED IN THIS DOCUMENT IS TRUE, ACCURATE AND COMPLETE.</b>				
_____		_____		
<b>DATE</b>		<b>SIGNATURE OF PERMITEE</b>		