



**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**



**APPLICATION FOR A FISH STOCKING PERMIT (\$2.00 FEE)**

**(Make Check Payable To: NJDFW)**

*ALL ITEMS MUST BE COMPLETED – REFER TO INFORMATION SHEET. (PLEASE PRINT OR TYPE)*

*PLEASE INCLUDE A PHOTOGRAPH OF POND OUTLET*

1. APPLICANT INFORMATION					OFFICIAL USE ONLY	
ORGANIZATION			CONTACT PERSON		DATE RECEIVED	PERMIT #
STREET ADDRESS					DRAINAGE	
CITY/TOWN	STATE	ZIP CODE		DECISION: (CHECK, INITIAL, DATE)		
TELEPHONE (DAYTIME) ( ) -			TELEPHONE (EVENING) ( ) -		APPROVE <input type="checkbox"/>	DENY <input type="checkbox"/>
NAME & ADDRESS OF WATERBODY OWNER (Please Print)			SIGNATURE OF WATERBODY OWNER		BIOLOGIST	DATE
					EFFECTIVE DATE	
					EXPIRATION DATE (October 31 for Grass Carp)	
2. WATERBODY INFORMATION					FIELD INSPECTED?	
NAME OF WATERBODY (ONE ONLY)			WATERBODY SIZE (ACREAGE)		YES <input type="checkbox"/>	
NEAREST ROAD (IF STREAM, GIVE APPROX.LOCATION OF UPSTREAM & DOWNSTREAM BOUNDARIES)					NO <input type="checkbox"/>	DATE INSPECTED
COUNTY	MUNICIPALITY				REMARKS:	
IF APPLYING FOR GRASS CARP, PROVIDE PERCENT OF WEED COVER _____ %	IF APPLYING FOR GRASS CARP, DESCRIBE PLANT PROBLEM (GIVE SPECIES IF KNOWN)					
FISH SPECIES PRESENT	IS THE WATER TO BE STOCKED OPEN TO THE GENERAL PUBLIC? YES <input type="checkbox"/> NO <input type="checkbox"/>					
3. FISH STOCKING INFORMATION						
FISH SPECIES (ONE PER ROW)	FISH STERILE (Check box)	NUMBER OF FISH	SIZE RANGE (IN INCHES)	SOURCE OF FISH (HATCHERY OR IF SALVAGE WATERBODY)	DECISION	
					APPROVED	DENIED
	<input type="checkbox"/>					
	<input type="checkbox"/>					
	<input type="checkbox"/>					
	<input type="checkbox"/>					
ARE FISH BEING STOCKED FOR A CONTEST, TOURNAMENT OR EVENT?				ARE FISH GOING TO BE MARKED OR TAGGED?		
YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, GIVE DATE(S)				YES <input type="checkbox"/> NO <input type="checkbox"/>		
ANTICIPATED STOCKING DATE(S):				IF YES, INDICATE MARK OR TAG TYPE AND ANY LETTERING THAT WILL APPEAR ON TAG.		
4. APPLICANT'S SIGNATURE						
I CERTIFY UNDER PENALTY OF LAW THAT THE INFORMATION PROVIDED IN THIS DOCUMENT IS TRUE, ACCURATE AND COMPLETE.						
DATE				SIGNATURE OF APPLICANT		

**PRINT**