APPLICATION AND RECEIPT FOR ALLIGATOR HIDE TAGS

Applicant Name: ____________________________ Telephone No.: (______) ________________ Recipient Number: __________________

Address: ____________________________

☐ Landowner Date: __________________

☐ Landowner’s Agent

Drivers Lic. No: __________________

<table>
<thead>
<tr>
<th>Landowner Name</th>
<th>Address</th>
<th>Brief Location Descript. Incl. Abstract No. &amp; Total Acres</th>
<th>County</th>
<th>Habitat Type</th>
<th>Acreage in Habitat Type</th>
<th>Issuance Rate</th>
<th># Tags Allowed</th>
<th>Tag Numbers Issued</th>
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NOTICE: A FALSE ENTRY OR STATEMENT IN A GOVERNMENTAL RECORD IS A CLASS A MISDEMEANOR UNDER THE TEXAS PENAL CODE.

I hereby certify that I am entitled to apply for alligator hide tags that I have received for the above property. I understand that I am responsible to restrict the use of tags to the area for which they are issued. I agree to report the use of tags and to return unused or damaged tags within 15 days of the close of the open alligator season.

PWD 369–W7000 (4/08)
Texas Parks and Wildlife Department maintains the information collected through this form. With few exceptions, you are entitled to be informed about the information we collect. Under Sections 552.021 and 552.023 of the Texas Government Code, you are also entitled to receive and review the information. Under Section 559.004, you are also entitled to have this information corrected.
TPWD, 4200 Smith School Road, Austin, TX 78744, www.tpwd.state.tx.us

__________________________________________
APPLICANT’S SIGNATURE

__________________________________________
SIGNATURE–TPWD ISSUING OFFICIAL

☐ cash ☐ check

Total Tags Available

Total Tags Issued

$ Amount Received

Submit to: Alligator Program, TPWD, 10 Parks and Wildlife Dr., Port Arthur, TX 77640