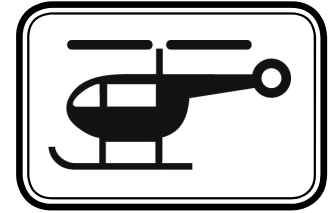


PILOT APPLICATION FOR AN AERIAL HUNTING PERMIT

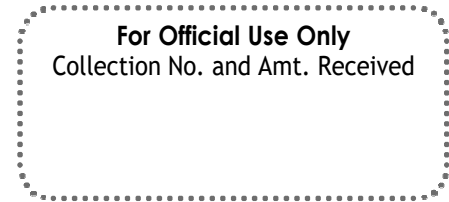
Application for an Aerial Hunting Permit to hunt coyotes and/or fox from aircraft is for the sole purpose of aiding in the protection of livestock from predation in Montana. This application will not be processed until it is completed, signed, and returned with at least one Livestock Producer Request and the annual fee of \$50 (*make checks payable to the Montana Department of Livestock*)



Full Name of Applicant (Pilot): _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Telephone: _____ Fee Enclosed \$ _____



Counties of Flight: _____
Does not restrict pilot to only flying these counties

PILOT CERTIFICATE DATA:

Certificate Number _____

Type of Ratings _____

MEDICAL CERTIFICATE:

Date and Class of Most Recent Flight Medical Exam:

Given by : _____

Limitations _____

AIRCRAFT AND PILOT DATA:

N Number	Aircraft Registration Decal Number	Make Model Horsepower	Registered Owner	Date of Last Annual Inspection	Total Time in Type
Montana Pilot Identification No. _____			Total Pilot Time _____		
Has your pilot's license ever been suspended or revoked: <input type="checkbox"/> Yes <input type="checkbox"/> No					

The undersigned hereby certifies that the foregoing information is true and correct; that he/she has read the statutes of Montana and the United States, and read the Department of Livestock Administrative Rules governing aerial hunting and agrees to abide by them; and the owner, lessee or administrator of the lands for which aerial hunting is requested has given written permission for applicant to conduct aerial hunting on said lands. The aircraft identified above is the only aircraft I intend to use for aerial hunting.

Signature of Applicant

Date: _____

MONTANA DEPARTMENT OF LIVESTOCK
LIVESTOCK PRODUCERS AERIAL HUNTING REQUEST FORM

PILOT(S) REQUESTED FOR AERIAL HUNTING: _____

Aerial hunting permits shall be issued to qualified pilots annually, expiring January 31, when, in the judgement of the Department of Livestock, a need exists for hunting coyotes and/or fox by aircraft to provide protection for livestock. No permit shall be issued for hunting coyotes and/or fox for recreational purposes. The landowner, administrator, or lessee must provide the information requested below.

THE SIGNATURE MUST BE COMPLETED BY THE REQUESTED LANDOWNER, ADMINISTRATOR OR LESSEE.
Please Print Clearly and Complete Section A or B and All Information Requested in Section C.

By Completing One of the Sections Below; I hereby Request and Consent to allow Aerial Hunting of Coyotes and/or Fox as Instituted Under the Department of Livestock's Aerial Hunting Permit System on those Lands Owned, Leased or Administered by me.

1. A) Number of Livestock Lost to Predation in the Past 12 Months: ___ Cattle ___ Sheep ___ Others
Number of Livestock lost to Predation in the Past 12 Months on BLM Leased Land: ___ Cattle ___ Sheep ___ Others
Predator(s) causing the depredations: ___ COYOTE ___ FOX (Mark one or both)
- B) If you are not experiencing livestock depredation, but are requesting aerial hunting on your land to benefit a neighbor who has, list the NEIGHBOR'S NAME(S): _____
(The Department of Livestock must receive a completed request indicating livestock losses from the neighbor(s) listed above before this request can be approved.)
- C) Name _____ Ranch Name (if any) _____
Address _____ City _____ State _____ Zip _____
County _____ Phone _____

Notice to Land Owner The department shall close an aerial hunting area upon receipt of written request from the landowner, administrator or lessee, or their agent.

Signature _____ Date _____

2. A) Number of Livestock Lost to Predation in the Past 12 Months: ___ Cattle ___ Sheep ___ Others
Number of Livestock lost to Predation in the Past 12 Months on BLM Leased Land: ___ Cattle ___ Sheep ___ Others
Predator(s) causing the depredations: ___ COYOTE ___ FOX (Mark one or both)
- B) If you are not experiencing livestock depredation, but are requesting aerial hunting on your land to benefit a neighbor who has, list the NEIGHBOR'S NAME(S): _____
(The Department of Livestock must receive a completed request indicating livestock losses from the neighbor(s) listed above before this request can be approved.)
- C) Name _____ Ranch Name (if any) _____
Address _____ City _____ State _____ Zip _____
County _____ Phone _____

Notice to Land Owner The department shall close an aerial hunting area upon receipt of written request from the landowner, administrator or lessee, or their agent.

Signature _____ Date _____

RETURN TO: Montana Department of Livestock
PO Box 202001
Helena, MT 59620-2001
(406) 444-5612