

LANDOWNER TURKEY APPLICATION

Instruction: Separate applications must be submitted for each permit request. Check applicable boxes and provide accurate name, mailing address, personal description, date of birth and the last four (4) digits of applicant's Social Security number. Also provide the legal description of all qualifying property you will be hunting. Submitting incomplete information will result in the return of your application. Make checks payable to Nebraska Game and Parks Commission and enclose the appropriate fee with your application. Mail to: Nebraska Game and Parks Commission, P.O. Box 30370, Lincoln, NE 68503-0370.

Hunters Helping the Hungry
 Donation (tax deductible) \$ _____

Permit	
Resident	
___ Spring turkey	\$16.50
___ Fall turkey	\$16.50
Nonresident	
___ Spring turkey	\$65.50
___ Fall turkey	\$65.50
All permit prices include a \$3 issuing fee.	

First Name _____ Middle Initial _____ Last Name _____

Mailing Address _____

City _____ State _____ ZIP _____

Daytime Phone Number _____ Last Four Digits of Social Security Number _____

Email address of applicant for permit notification _____

		Feet	Inches	Pounds	Month	Day	Year	
Hair Color	Eye Color	Height		Weight	Birthdate			Sex

Bowhunter Education Number – State Certified _____ Firearm Hunter Education Number – State Certified _____

Yes No I certify that I am a RESIDENT of the State of Nebraska as defined by the rules and regulations of the Nebraska Game and Parks Commission.

I certify that my privilege to hunt, fish or harvest fur is NOT currently revoked in any jurisdiction (county, state, city, federal or Canadian province), and I am NOT delinquent on any child support payments.

NOTE: Submitting incomplete information will result in the return of your application.

The farm or ranch land listed in this application must be used for agricultural purposes.

Check the box below that best certifies your qualifications for a limited landowner permit:

<p>Relation:</p> <p><input type="checkbox"/> Qualifying Landowner (Owner/Leaseholder/Partner/Officer/Shareholder/Beneficiary)</p> <p><input type="checkbox"/> Spouse <input type="checkbox"/> Child/Stepchild <input type="checkbox"/> Sibling Sharing Ownership</p> <p><input type="checkbox"/> Spouse of Child/Stepchild <input type="checkbox"/> Spouse of Sibling Sharing Ownership</p>	<p>Possession:</p> <p><input type="checkbox"/> Own</p> <p><input type="checkbox"/> Lease (Resident only)</p>
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Name of property owner/leaseholder/partnership/corporation/trust (individual or entity) _____ Resident NonResident

FARM AND RANCH LAND - LEGAL DESCRIPTION							Check One Box for Each Parcel Listed		
Owner Name	Quarter	Section	Township	Range	County	Acres	Own	Lease	Corp., Part., Trust
John Doe	W1/2NW1/4	16	28N	15E	Cather	80		X	

I certify that I am eligible to apply for a limited landowner permit. All farm and ranch land listed is qualifying property owned and/or leased by me or a member of my immediate household. I, as the qualified applicant, request a limited landowner permit to be issued to me.

Signature of Qualified Applicant: _____ Date: _____

Credit Card Number – VISA, MasterCard or Discover	Expiration Date	3-digit code

