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) \$	First Name			Middle Initia	al		Last Name			
	Mailing Addres	ŝŝ								
Permit Resident	City State				ZIP					
Spring turkey \$16.50 Fall turkey \$16.50	Daytime Phone Number Last Four Digits of Social Security Number							ity Number		
Nonresident	Email address	of applicant fo	or permit notifie	cation						
Spring turkey \$56 Fall turkey \$56			Feet	Inches	Pounds	Month	Day	Year		
All permit prices include a \$3 issuing fee.	Hair Color	Eye Color	Hei	ght	Weight		Birthdate		Sex	
	Bowhunter Education Number – State Certified F					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.

The farm- or ranchland listed in this application must be used for agricultural purposes.

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

Possession:	Relation:		
0wn	Qualifying Landowner (Owner/Leaseholder/Part	Spouse	
Lease (Resident only)	Child/Stepchild	Spouse of Child/Stepchild	
	Grandchild/Step-grandchild	Spouse of Grandchild/Step-grandchild	
	Sibling Sharing Ownership	Spouse of Sibling Sharing Ownership	Resident Nonresident

Name of property owner/leaseholder/Partnership/Corporation/Trust (individual or Entity)

FARM AND RANCH LAND - LEGAL DESCRIPTION (If additional room is needed, an attachment form is available. Photocopied application forms are acceptable.)							Check One Box for Each Parcel Listed		
Owner Name	County	*NEW*	Parcel ID	*NEW*	Total Acres	Acres Leased	0wn	Lease	Corp., Part., Trus
John Doe	Cather		00125431		80	40		Х	
I certify that I am eligible to apply for a limited landowner applicant, request a limited landowner permit to be issued		d ranch land listed is q	ualifying property	owned an	d/or leased by me		immedia	te househo	ld. I, as the qualified
Signature of Qualified Applicant:						Date:			
If paying by credit card please provide the following informati	on:								
Card Holder's First Name Last Name									
Address	City				State			ZIP Code	e
						the localized balance in the second sec	1999-199 - Service States - 1 11/1/1/1/1	1521	 3-digit card verification No. or
Credit Card number - VISA, MasterCard or Discover		Expiration Date			3-digit c	ode 🔛	emeter enter	HEUS PROTECT	back of card