

Beaver Control Program (BCP) TRAPPER VERIFICATION FORM

Note: Before you enter information it is recommended this application be saved to your computer.

DEADLINE: February 15, 2024

Submit by the above deadline by email to Annette Ellert, Agriculture Program Administrator at aellert@sarm.ca

PART I - APPLICANT				
RM/First Nation:				No.:
PART 2 - TRAPPER INFO	ORMATION			
NAME OF TRAPPER: _				
- First N period	lations Status num d listed below. st Nations Status #	nber or copy of treat:	aty fur trap	rvice period listed below. oping licence for service ary. 15, 2024
Approved Date of	Number of Beaver		Total Paid	
Beaver Removal	Removed	Trapper Per Beaver	Total Falu	(to three digits)
Totals				





