

It is very important that the quantities of fish taken and bought be reported by unit. It is fur-ther requested that you estimate the actual num-ber of fish by unit. If you have any questions regard-ber of fish by unit. If you have any questions regard-

PLEASE SEND ENTIRE BROCHURE.
Tape edges before mailing – NO STAPLES.

Subject to the penalties for making unsworn false statements under RSA 641:3.

SIGNATURE: _____
 LICENSE # _____
 STATE: _____ ZIP: _____
 CITY: _____
 ADDRESS: _____
 NAME: _____ *(please print)*

I will not harvest / import (check one or both), any live bait beginning the month of _____, _____.
 I will resume activity the month of _____, _____.

INSTRUCTIONS FOR FORMS 84 AND 84-A

Please note that this brochure contains both forms utilized by live bait dealers issued permits by the State of New Hampshire. Use Form 84, to report harvested live bait. Use Form 84-A, to report imports of live bait. Each brochure is for one individual. If your business has more than one person with a bait dealer's permit, each must submit a separate report. Please be sure to note your license number on the cover.

If you will not be dealing in bait fish for an extended period of time, you may notify the department in advance (see right). Otherwise, reports must be received by the 15th of the month following the report period (Fis 502.08(a)). IN ALL CASES, THE ENTIRE BROCHURE MUST BE MAILED. PARTIAL BROCHURES OR THOSE LACKING SIGNATURES WILL NOT BE ACCEPTABLE.

Please use one Form 84 to report each body of water fished in a single day. If you fish two lakes on the same day, use two forms. Use more than one brochure if necessary. Form 84-A is self-explanatory.

For information or assistance regarding this report, contact the Region 2 office at 744-5470, or the Inland Fisheries Division in Concord headquarters at 271-2501.

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IMPORTANT

The information provided by these reports will assist the New Hampshire Fish & Game Department in making fisheries management decisions. These fisheries may provide you with a substantial livelihood. Please help us manage the fisheries for your benefit by completing this report accurately.

These reports shall be filled out on a daily basis, through the end of the month and returned to NH Fish & Game Department, Region 2 Office, PO Box 417, New Hampton, NH 03256 by the 15th of the following month. Failure to comply with this rule shall result in the revocation of your bait dealer's license.

This report shall be either in the possession of or reasonably accessible to the licensee so that it will be open for inspection by the Executive Director or his agent at any time. (Fis 502.08(b))

For information or assistance regarding this report, contact the Region 2 office at 744-5470, or the Inland Fisheries Division in Concord headquarters at 271-2501.



NAME: _____ <i>(please print)</i>
ADDRESS: _____
LICENSE # _____
BROCHURE # _____ OF _____ BROCHURES
MONTH _____ YEAR _____
<input type="checkbox"/> NEED MORE BROCHURES
<input type="checkbox"/> NO ACTIVITY THIS MONTH
Signature _____
Subject to the penalties for making unsworn false statements under RSA 641:3.

New Hampshire Fish and Game Department
fishnh.com

POST OFFICE WILL NOT DELIVER WITHOUT CORRECT POSTAGE

FROM:

NH FISH AND GAME DEPT.
 REGION 2
 PO BOX 417
 NEW HAMPTON, NH 03256-0417

NOTICE OF EXTENDED INACTIVITY

Please note below the type and dimensions of equipment utilized in the harvest reported in this month's booklet.

Net Dimensions: 1. _____
 2. _____
 3. _____

Trap Dimensions: 1. _____
 2. _____
 3. _____

This brochure supersedes all previously issued Forms 84 and 84-A.

fisherhess@wildlife.nh.gov.
 and Game Dept. at: (603) 271-2501 or via email at: fisherhess@wildlife.nh.gov.

ing how to do this or if you need more brochures, or have any questions, please contact NH Fish and Game Dept. at: (603) 271-2501 or via email at: fisherhess@wildlife.nh.gov.

FORM 84

Date: _____
 Body of Water: _____
 Town: _____ State: _____

TRAPS: Number Fished: _____ Number of hours fished: _____
 NETS: Number Fished: _____ Number of hours fished: _____
 ANGLED: Number of lines fished: _____ Number of hours fished: _____

SPECIES (specify)	Quantity
SPECIES (specify)	Quantity

(Please use one form for each body of water)

FORM 84-A

Date	Purchased From	City/State	Species	Amount	Est. # of Fish

FORM 84

Date: _____
 Body of Water: _____
 Town: _____ State: _____

TRAPS: Number Fished: _____ Number of hours fished: _____
 NETS: Number Fished: _____ Number of hours fished: _____
 ANGLED: Number of lines fished: _____ Number of hours fished: _____

SPECIES (specify)	Quantity
SPECIES (specify)	Quantity

(Please use one form for each body of water)

FORM 84-A

Date	Purchased From	City/State	Species	Amount	Est. # of Fish

FORM 84-A

Date	Purchased From	City/State	Species	Amount	Est. # of Fish

FORM 84-A

