



License # \_\_\_\_\_

**2019**  
Sturgeon Harvest Permit Application

**The Little Traverse Bay Bands of Odawa Indians  
Sturgeon Harvest Permit Application**

**Harvest will take place in 2019 Season (between Mid-February thru Mid-June )**

Application must be fill out completely.

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street

City State Zip

County \_\_\_\_\_ Date of Birth \_\_\_\_\_

Phone Number \_\_\_\_\_ Cell \_\_\_\_\_

Alternate Number \_\_\_\_\_

Tribal Enrollment # \_\_\_\_\_ Hunt/Fish # H- \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_ Eye Color \_\_\_\_\_ Hair Color \_\_\_\_\_

Male  Female

Email Address: \_\_\_\_\_

Please make note that it is your responsibility to keep the department informed of any changes regarding your contact information, failure to keep the department updated of any changes may result in the loss of your chance to harvest a sturgeon if selected.

I solemnly swear (or affirm) the information provided on the Sturgeon Harvest Application is true to the best of my knowledge, information and belief and that I have received a copy of the 2018 Little Traverse Bay Bands of Odawa Indians Inland Consent Decree Rules and Regulations and I agree to abide by them.

Signature \_\_\_\_\_

Date \_\_\_\_\_

(For LTBB Office Use only)

Harvest Tag Dates:

Amount Received \_\_\_\_\_ Received by \_\_\_\_\_

Method of Payment \_\_\_\_\_ Date \_\_\_\_\_

Elder  Minor