2026 Great Lakes Application

License # _____

THE LITTLE TRAVERSE BAY BANDS OF ODAWA INDIANS
NATURAL RESOURCE COMMISSION
2026 COMMERCIAL AND SUBSISTENCE FISHING LICENSE APPLICATION

CAPTAIN _____ HELPER _____ SUBSISTENCE _____

Name:_____
Last First Middle

Address:_____
Street

_____
City State Zip

COUNTY:_____ Tribal Enrollment #_____

DATE OF BIRTH:_____ PHONE NUMBER_____

ALTERNATE NUMBER: _____ CELL: _____

Email: _____

Male _____ Female _____

HEIGHT:_____ WEIGHT: _____ EYE COLOR: _____ HAIR COLOR: _____

I certify that the above information is true and that I have received a copy of the Chippewa Ottawa Resource Authority Commercial, Subsistence and Recreational Fishing Regulations for the 1836 Treaty Ceded Waters of Lake Superior, Huron and Michigan and agree to abide by them.

_____ _____
Signature Date

(For LTBB Office Use only)

Amount Received_____ Received by_____

Method of Payment_____ Date_____

Assigned Card Number _____ Receipt # _____

Revised 01012026