



Maine Department of Inland Fisheries and Wildlife
353 Water Street, 41 SHS, Augusta, ME 04333
Phone 207-287-5232 / Fax 207-287-9037

LEASHED DOG TRACKING PERMIT APPLICATION

In accordance with the provisions of the Maine Revised Statutes, Title 12, Section 11111, and Inland Fisheries and Wildlife Leashed Dog Tracking Permit Rules as defined under Chapter 25. The fee for a 3-year permit for leashed dog to track a wounded animal is \$81.

___ Application Fee \$25.00 ___ New 3-Year Permit - \$81.00 ___ Renewal 3-Year Permit - \$81.00

Current Hunting License Number: _____ MOSES ID: _____

Name: _____ Date of Birth: ____/____/____
First Last MI MM DD YYYY

Company Name: _____ Social Security Number or Federal ID: _____
Required for New Applicants

Mailing Address: _____
Street/Road or Box # City or Town State Zip Code

Email Address: _____ Phone Number: (____) ____ - _____

Height: _____ Weight: _____ Hair Color: _____ Eye Color: _____ Gender: _____

Driver's License State: _____ Driver's License Number _____

1. Would you like your contact information published on the Maine Department of Inland Fisheries and Wildlife website for leashed dog tracking services? ___ Yes ___ No
 List Coverage area for leashed dog tracking services: _____

2. Has your hunting license authority been revoked in the past 5 years? ___ Yes ___ No
 If yes, please explain: _____

Applicant must submit a \$25.00 non-refundable application fee and possess a valid big game license in order to apply for this permit. Applicant must complete a written exam with a passing score of 80% or better, issued by the Department. Unsuccessful applicants must wait 30 days before being able to retake the written exam.
 To access current Department rules regulating Leashing Dog Tracking Permits, see Chapter 25, by visiting <https://www.maine.gov/sos/rulemaking/agency-rules/department-inland-fisheries-and-wildlife-rules>

By affixing your signature below, you: Certify that all statements provided are true and accurate. You understand that any false statement made in this application or in any documents provided may result in denial, suspension, or revocation of your license or permit, and possible criminal prosecution.

Signature: _____ Date: _____

HAND-DELIVER, MAIL, OR EMAIL APPLICATION WITH THE APPROPRIATE FEE:
 Make check payable to: Treasurer, State of Maine

Maine Department of Inland Fisheries and Wildlife
Licensing Division – Guide Licenses
 353 Water Street, SHS 41
 Augusta, ME 04333
Guide.IFW@maine.gov

CREDIT CARD PAYMENT All Major Credit Cards Accepted	
Name on Card:	_____
Card #:	_____
Expiration Date:	____/____ Code: _____
Billing Address:	_____

If more space is needed to answer any questions, please use back of form or attach an additional document to this application.