



South Dakota Game Fish & Parks Resident Wholesale Bait Dealer Annual Report



(Year)

(License Number)

Please Print:

Applicant Name: _____
Last
First
MI
Business Name

Mailing Address: _____
Street/PO Box
City
State
Zip
Phone Number: (____) _____ - _____

Please complete all applicable categories, listing date, species, and gallons of baitfish, pounds of leeches and number of amphibians and crustaceans. This form must be submitted along with your application for next year's license (or by January 31 of the next year if you do not plan to obtain a license). A new license will not be issued unless this completed form is returned to the following address: **Game, Fish, & Parks, 20641 SD HWY 1806, Ft. Pierre, SD 57532**. If additional space is needed please attach a separate sheet of paper in the same format.

A. Bait purchased from other Resident Wholesale Dealers:

Name of Supplier	Address of Supplier	Species	Amount	Unit (circle)
1) _____	_____	_____	_____	Gal. Lbs. #
2) _____	_____	_____	_____	Gal. Lbs. #
3) _____	_____	_____	_____	Gal. Lbs. #

B. Bait Purchased from Non-Resident Wholesale Dealers:

Name of Supplier	Address of Supplier	Species	Amount	Unit (circle)
1) _____	_____	_____	_____	Gal. Lbs. #
2) _____	_____	_____	_____	Gal. Lbs. #
3) _____	_____	_____	_____	Gal. Lbs. #

C. Bait sold in South Dakota:

Species	Amount	Unit (circle)	Species	Amount	Unit (circle)
1) _____	_____	Gal. Lbs. #	4) _____	_____	Gal. Lbs. #
2) _____	_____	Gal. Lbs. #	5) _____	_____	Gal. Lbs. #
3) _____	_____	Gal. Lbs. #	6) _____	_____	Gal. Lbs. #

D. Bait Sold Outside of South Dakota:

Name of Buyer	Address of Buyer	Species	Amount	Unit (circle)
1) _____	_____	_____	_____	Gal. Lbs. #
2) _____	_____	_____	_____	Gal. Lbs. #
3) _____	_____	_____	_____	Gal. or Lbs.

****E. Bait trapped or collected by your business:** (Use space provided on back of this form)

I declare the information in this report to be completed and correct. I understand that if it is nor complete or correct the Department of Game, Fish, and Parks has cause to prosecute and/or refuse to issue me a bait dealer license for the next licensing period.

X _____
Bait Dealer's Signature

Print or Type Name

____/____/____
Date

