

AFFIDAVIT – BEAVER CONTROL

s:			
		_	
am the	e registered owner of the f	ollowing land location(s):	
	OR		
	UK		
am au	thorized to remove beaver	from the following locatio	on(s
am au		-	on(s
am au	thorized to remove beaver	-	on(s
am au —	thorized to remove beaver	-	on(s
am au 	thorized to remove beaver (copy of consent for	n(s) attached)	on(s
am au 	thorized to remove beaver (copy of consent for (Legal Description)	n(s) attached) (# of Beaver Tails)	on(s

We grant permission for County personnel to access this land for the purpose of verification that agricultural land was being flooded by these beavers.

(Signature)	(Witness)	(Date)				
INSPECTOR'S COMMENTS:						
OFFICE USE ONLY – BEAVER TAIL PAYMENTS						
Invoice Number:		tion: # Beaver Tails				
Beaver Tails @ \$40.00 =	Payment Total \$	(<mark>2-62-24-2280-0000 EX</mark>)				
Approved By:	Date:					