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| DAH-BADC-045 (rev 07/2025) |
|  | Wisconsin Department of Agriculture, Trade and Consumer Protection*Division of Animal Health*Bureau of Animal Disease ControlLockbox 93598, Milwaukee, WI 53293-3598Phone: (608) 224-4872 Fax: (608) 224-4871  | OFFICE USE ONLY |
| Inspected by:      Date inspected:      [ ]  Approved[ ]  Disapproved / Reason:      |
| Wisconsin Farm-Raised Deer Hunting Ranch Application |
| *No person may grant or offer, for consideration, the opportunity to hunt farm-raised deer without a valid hunting ranch certificate. ATCP § 10.47(2)(b). Engaging in those activities without this certificate is subject to civil forfeiture, fine, and/or imprisonment. Wis. Stats. § 95.99.* *Personal information you provide may be used for purposes other than that for which it was originally collected.* (*Wis. Stat. §* 15.04(1)(m)).This institution is an equal opportunity employerThis institution is an equal opportunity employer*ATCP § 10.47(3), Wis. Stats. § 95.55.* |
| **REGISTRATION INFORMATION** |
| REGISTRATION NUMBER #:       | DATE:       |
| GPS Coordinates (front gate location):  | LONG: LAT:             |
| LEGAL ENTITY:      | DOING BUSINESS AS (if different):      |
| OWNER NAME:      | CONTACT NAME (if different):      |
| OWNER TELEPHONE:      | OWNER CELL PHONE:      | CONTACT TELEPHONE:      | CONTACT CELL PHONE:      |
| MAILING ADDRESS:      | DEER LOCATION (if different):      |
| CITY/ STATE / ZIP:      | CITY/ STATE / ZIP (if different):       |
| TOWN:      | COUNTY:      | TOWN:      | COUNTY:      |
| SECTION:      | FIRE NUMBER:      | SECTION:      | FIRE NUMBER:      |
| **HERD INFORMATION** |
| Number of acres fenced for deer:       | Other separately registered herds at this location? | [ ]  Yes [ ]  No |
| If yes, what is the registration number(s) of the other herd(s)?       |
| Have you had an inspection conducted by the department to determine whether there is medically significant separation?  | [ ]  Yes [ ]  No |
| If you have White-tailed deer in this herd, what is your WDNR fencing certificate number for the hunting preserve?      |
| When was your fencing certificate issued?       | How many acres does it show?       |
| *Please provide an estimate of the farm-raised deer population on the hunting preserve premises by species, age and sex. (Attach additional sheets if needed for additional species)* |
| **SPECIES:** | **SPECIES:** |
| **FAWNS:** | MALE |       | FEMALE |       | **FAWNS:** | MALE |       | FEMALE |       |
| **YEARLINGS:** | MALE |       | FEMALE |       | **YEARLINGS:** | MALE |       | FEMALE |       |
| **ADULTS:** | MALE |       | FEMALE |       | **ADULTS:** | MALE |       | FEMALE |       |

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| *List each type of identification and each associated identification number for each farm-raised deer on the hunting preserve premises that bears any attached or implanted identification (make additional copies of this page as needed).* |
| **#** | **SPECIES** | **SEX** | **IDENTIFICATION** |
| 1 |       |       |       |
| 2 |       |       |       |
| 3 |       |       |       |
| 4 |       |       |       |
| 5 |       |       |       |
| 6 |       |       |       |
| 7 |       |       |       |
| 8 |       |       |       |
| 9 |       |       |       |
| 10 |       |       |       |
| 11 |       |       |       |
| 12 |       |       |       |
| 13 |       |       |       |
| 14 |       |       |       |
| 15 |       |       |       |
| 16 |       |       |       |
| 17 |       |       |       |
| 18 |       |       |       |
| 19 |       |       |       |
| 20 |       |       |       |
| 21 |       |       |       |
| 22 |       |       |       |
| 23 |       |       |       |
| 24 |       |       |       |
| 25 |       |       |       |
| 26 |       |       |       |
| 27 |       |       |       |
| 28 |       |       |       |
| 29 |       |       |       |
| 30 |       |       |       |

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| **SIGNATURE(S)** |
| I (We) certify that the above information in this application is correct, and that I (we) are familiar with the Wisconsin statutes and administrative code applicable to keepers of farm-raised deer and farm-raised deer hunting preserves in Wisconsin. *Applicant(s) or authorized representative of applicant must sign and date below.* |
| APPLICANT OR AUTHORIZED REPRESENTATIVE SIGNATURE:      | DATE:      |
| PRINT NAME OF PERSON SIGNING:      |
| TITLE OF PERSON SIGNING:      |
| APPLICANT OR AUTHORIZED REPRESENTATIVE SIGNATURE:      | DATE:      |
| PRINT NAME OF PERSON SIGNING:      |
| TITLE OF PERSON SIGNING:      |
| Please enclose a non-refundable fee of **$500**.  |
| ***ENCLOSE check or money order payable to****:*Department of Agriculture, Trade and Consumer Protection | ***MAIL payment and application to:***DATCPPO Box 93598Milwaukee, WI 53293-3598 |

Equal Opportunity Employer