

**KINGWOOD TOWNSHIP – UKARISH PROPERTY:
CONTROLLED HUNTING PERMIT APPLICATION**

Kingwood Township, New Jersey

Kingwood Township

Physical Address: 599 Oak Grove Road and Route 519,
Frenchtown NJ 08825

Mailing Address: P.O. Box 199
Baptistown, NJ 08803-0199

Phone: 908-996-4276 Fax: 908-996-7753

Official Use Only: Do Not Write In This Box

PERMIT #: _____

Permit Type:

**KTUP Extended Season
2013-2014 Season –
December 9 to February 14, 2014**

Received: \$ _____ Date: _____ Staff: _____

First Name: _____

Last Name: PLEASE PRINT _____

Street Address: PLEASE PRINT _____

Town: PLEASE PRINT _____ State: _____ Zip: _____

Phone: (Day) _____ Phone: (Eve.) _____

Phone: (Cell) _____ Email Address: PLEASE PRINT _____

Conservation Identification Number (CID#) PLEASE PRINT _____

Hunting License Number: PLEASE PRINT _____

Drivers License Number: PLEASE PRINT _____

Vehicle #1 - Color: _____ Manufacturer: _____ Plate #: _____ State: _____

Truck SUV 2 Door 4 Door Mini Van Van Other: _____

Vehicle #2 - Color: _____ Manufacturer: _____ Plate #: _____ State: _____

Truck SUV 2 Door 4 Door Mini Van Van Other: _____

READ THIS STATEMENT AND SIGN BELOW: I, the undersigned, have provided the above information and know that information to be true and accurate. I understand that failure to provide accurate information or to sign and comply with the Kingwood Township – Ukarish Property: Wildlife Manage Guidelines as well as federal, state, county, and municipal laws governing my actions, may cause the non refundable revocation of this permit.

Signature of Participant (Parent or Guardian If Under 18) Date: _____