



WASHINGTON DEPARTMENT OF FISH AND WILDLIFE

Wildlife Program | P.O. Box 43141

Olympia, WA 98504-3141

Phone: (360) 902-2200

BEAVER RELOCATION PILOT

Landowner Attestation Form

Name of landowner, land manager or their designee:			
Email:		Phone:	

Property Name (if applicable):					
Property Address:					
	City:		State:		Zip:

I, , attest to the following:

- I have requested that beaver be relocated to my property
- I acknowledge the risks associated with beaver relocation. These include the potential for beaver mortality, beaver dispersal, property damage, and transfer of invasive species. I will not hold WDFW liable for any damage or other negative wildlife interactions caused by relocated beaver.
- I have notified potentially affected neighboring property owners, land managers, and/or their designees that I am requesting to have beaver released on my property and have reported their feedback to this Beaver Relocator:
- I agree to allow WDFW and the above-named Beaver Relocator access to my property for post-relocation monitoring of beaver activity.

Signature

Date

Return this form to the permitted Beaver Relocator you are working with.

To be completed by the permitted Beaver Relocator:			
Permit Number:		Site ID:	
Date Form Received:			