

PLEASE READ BEFORE COMPLETING APPLICATION

If you are unsure about any part of the application, please call the CNCP at 337-735-8674. We will help you complete it correctly to avoid delays processing your application. The pages that must be returned before your application can be processed are marked “**PAGE REQUIRED**” in the upper right corner.

Please return completed application through one of the following options:

MAIL

LDWF

Attn: CNCP

200 Dulles Drive, Rm. 1013

Lafayette, LA 70506

FAX

Attn: CNCP

337-262-1083

EMAIL*

Atten: CNCP

JHogue-Manuel@wlf.la.gov

***Please scan and ensure legibility**

First Time Applicants

You must turn in the following:

- 1) A **complete** Coastwide Nutria Control Program Application Form, including the landowner's/ manager's signature (except no signature needed for Office of State Lands & WMAs)
- 2) A Designated Assistant Form (if needed)
- 3) A completed W-9 tax form
- 4) A map **and** either a recent tax receipt or a copy of the trapping lease
- 5) A signed Service Agreement (Keep rules portion for your records)

Returning Participants, Same Properties

You must turn in the following:

- 1) A **complete** Coastwide Nutria Control Program Application Form, including the landowner's/ manager's signature (except no signature needed for Office of State Lands & WMAs)
- 2) A Designated Assistant Form (if needed)
- 3) A signed Service Agreement (Keep rules portion for your records)

Returning Participants, New Properties

You must turn in the following:

- 1) A **complete** Coastwide Nutria Control Program Application Form, including the landowner's/ manager's signature (except no signature needed for Office of State Lands & WMAs)
- 2) A Designated Assistant Form (if needed)
- 3) A map **and** either a recent tax receipt or a copy of the trapping lease
- 4) A signed Service Agreement (Keep rules portion for your records)

Registration Period: September 1, 2024 through February 28, 2025

Registration for Public Properties

If you wish to choose Wildlife Management Areas (WMAs) and/or Office of State Lands (OSL) properties for the CNCP, write the names of your chosen properties on the “**Property or Landowner Name**” line of your application or circle the properties and send this page with your application. You **do not** need to seek a signature from the WMA or Office of State Lands land managers.

WMAs: There are 4 WMAs available for participation and you may choose up to 4:

- Joyce WMA
- Manchac WMA
- Maurepas Swamp WMA
- Pearl River WMA (South of I-10 only)

You can view maps of WMAs online at <http://www.wlf.louisiana.gov/wma> or at the WMA Check-In Stations. You must adhere to all WMA rules & regulations. A WMA use permit is required to access any WMA. Any other WMA requires WMA manager permission, call 337-735-8674 to inquire.

OSL: You may choose up to three (3) properties from the table below. Maps for these properties will be mailed with your CNCP participation card. If you have any questions regarding the list of properties, please call Jennifer Hogue-Manuel at 337-735-8674. If you have questions about prohibited activities on state lands, call OSL at 225-342-4578. **You may view overview maps of these properties at <https://nutria.com/nutria-control-program/coastwide-nutria-control-program/application>**

The OSL maps for the CNCP have been modified to clarify the state land properties eligible for harvesting nutria through the CNCP. **Only maps obtained directly from the Office of State Lands eligible for the 2024-2025 CNCP season should be used. Maps from prior CNCP Seasons should not be used.** The harvest of nutria outside of the areas indicated on the included maps may result in a class 2 violation and potential disqualification from the program.

Please remember that participants **may use public waterways** cutting through private property to access eligible lands, but participants are not allowed to harvest nutria along waterways unless they have permission to harvest nutria from the adjacent lands. **Please observe and obey all posted properties and waterways.**

Public Lands: <https://nutria.com/nutria-control-program/coastwide-nutria-control-program/application>

Name	Acres	Major Parish	Name	Acres	Major Parish
Bayou Cannon	2,381	Iberville	Lake Henderson South	1,075	St. Martin
Big Island	2,933	Iberville	Lake Long	4,845	Lafourche
Cow Island	7,319	St. Martin	Lake Natchez	1,915	Iberville
Crook Chene Cove	6,950	St. Martin	Middle Flat	4,848	Iberville
Duck Lake	8,499	St. Martin	Patent Plaquemines	1,832	Plaquemines
Flat Lake	9,658	St. Martin	Patent Terrebonne East	709	Terrebonne
Grand Lake East	3,535	St. Martin	Patent Terrebonne West	206	Terrebonne
Grand Lake North	40,470	Iberia	Pierre Part South	1,078	St. Martin
Grand Lake South	8,114	St. Mary	Quitclaim Plaquemines	609	Plaquemines
Grassy Lake North	8,974	Iberville	Sixmile Lake	11,611	St. Martin
Grosse Tete	1,385	Iberville	Sweet Bay Lake	2,328	St. Mary
Gulf Accr. Cameron	2,715	Cameron			
Hog Island	2,027	Iberia			
Lake Boeuf	4,881	Lafourche			

COASTWIDE NUTRIA CONTROL PROGRAM

PARTICIPANT APPLICATION FORM (2024-2025)

Registration Period: September 1, 2024 through February 28, 2025

SSN: _____ TRAPPING LICENSE NUMBER: _____

NAME: _____ MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ PHONE: _____

EMAIL: _____ Do you prefer PHONE CALLS or EMAIL? (circle one)

BIRTH DATE: ____/____/____ DRIVER'S LICENSE NO: _____ STATE: _____

SIGNATURE OF APPLICANT _____ DATE _____

Have you previously participated in the program? YES NO (Please circle answers)

If yes, were you a PARTICIPANT or an ASSISTANT?

What was the last season you participated? _____

Will you be trapping/hunting the same property? YES NO

I WISH TO TAKE NUTRIA ON PROPERTY OWNED OR MANAGED BY:

PROPERTY OR LANDOWNER NAME: _____

REPRESENTATIVE NAME: _____ LANDOWNER or LAND MANAGER (circle one)

ADDRESS: _____ CITY: _____ STATE: _____

ZIP: _____ PHONE: _____

To be completed by Landowner/Manager ONLY:

Signature of Landowner / Manager DATE
If Trapping Lease, Date of Expiration _____

DESCRIPTION OF AREA TO BE TRAPPED / HUNTED

WITH THIS APPLICATION YOU MUST SUBMIT: 1) COPY OF COMPLETE PROPERTY TAX RECEIPT OR 2) A LEGAL TRAPPING LEASE. EITHER OF THESE MUST CONTAIN TOWNSHIP, RANGE AND SECTION INFORMATION. YOU MUST ALSO INCLUDE A MAP OUTLINING THE PROPERTY TO BE TRAPPED / HUNTED. THIS SECTION MUST BE COMPLETED IN ORDER FOR YOUR APPLICATION TO BE PROCESSED.

PARISH: _____ TOTAL ACRES TO BE TRAPPED / HUNTED _____

TOWNSHIP: _____ RANGE: _____ SECTIONS: _____

TOWNSHIP: _____ RANGE: _____ SECTIONS: _____

*****DO NOT WRITE BELOW THIS LINE*****

NUTRIA CONTROL PROGRAM REGISTRATION # ISSUED TO THIS APPLICANT _____



COASTWIDE NUTRIA CONTROL PROGRAM
DESIGNATED ASSISTANT FORM (2024-2025)

As a program requirement for the Coastwide Nutria Control Program, everyone who is harvesting nutria for the incentive payment must carry their registration card at all times when in possession of nutria tails. This could be anyone who is trapping/hunting for a registered participant or anyone who is turning tails in to a collection site for a participant. Anyone trapping/hunting for a registered participant must trap/hunt nutria from the participant's registered property only. Anyone that is listed on this DESIGNATED ASSISTANT FORM will receive a registration card listing the participant who the designated assistant works for.

Participant's Name _____

If a designated assistant will be HARVESTING NUTRIA and bringing tails to a collection site please use the spaces below:

NOTE: Anyone hunting/trapping nutria must have a trapping license number

Assistant's Name _____

Assistant's Trapping License# _____

Assistant's Name _____

Assistant's Trapping License# _____

Assistant's Name _____

Assistant's Trapping License# _____

Assistant's Name _____

Assistant's Trapping License# _____

Assistant's Name _____

Assistant's Trapping License# _____

If a designated assistant will ONLY be bringing tails to a collection site please use the spaces below:

NOTE: If the assistant is going to be hunting/trapping they must have a trapping license number and use the above section

Assistant's Name _____

Assistant's Driver's License # _____

Assistant's Name _____

Assistant's Driver's License # _____

Assistant's Name _____

Assistant's Driver's License # _____

Assistant's Name _____

Assistant's Driver's License # _____

Assistant's Name _____

Assistant's Driver's License # _____

KEEP FOR YOUR RECORDS

COASTAL AND NONGAME RESOURCES DIVISION 2024-2025 COASTWIDE NUTRIA CONTROL PROGRAM SERVICE AGREEMENT

I HEREBY AGREE THAT I WILL FOLLOW ALL RULES AND REGULATIONS PERTAINING TO THE PUBLIC AND/OR PRIVATE PROPERTIES I HARVEST AND WILL ABIDE BY THE FOLLOWING:

- All 2024-2025 Louisiana trapping and Coastwide Nutria Control Program (CNCP) rules and regulations will be strictly adhered to.
- Participation in the CNCP is a privilege that can be rescinded at any time. Violation of any WMA or refuge rules/regulations, any other fish and wildlife laws, or failure to comply with the stipulations in this Agreement may result in cancellation of the participant's CNCP privileges. Additionally, LDWF has the right to temporarily suspend CNCP privileges if the participant has a pending violation. LDWF has the right to revoke privileges due to inappropriate behavior towards LDWF or its contractors.
- Participation in the CNCP requires a valid Louisiana trapping license and submission of a completed CNCP application to the department. Applications determined to be incomplete will be alerted via phone, email, and/or letter that registration could not be finalized. For applications determined to be complete and valid, the participant will be notified by mail that his registration is finalized and a CNCP registration card will be issued.
- The participant must indicate in the application if one or more assistants will aid harvest or deliver tails on his behalf to the collection station. The participant is responsible for their assistant's conduct while their assistants are harvesting nutria as part of the program. Any misconduct by the assistant may result in the cancellation of the assistant's and participant's CNCP privileges.
- Applications submitted to LDWF by October 1 will be processed by the opening of the trapping season. Applications submitted after October 1 will be processed in the order received, but might not be finalized before the start of the trapping season.
- Applications listing only water bodies, without signature of an adjacent landowner or designated representative, will be considered incomplete.
- Only nutria harvested during the open trapping season, from coastal Louisiana (south of Interstate 10 from the Louisiana-Texas line to Baton Rouge, I-12 from Baton Rouge to Slidell, and I-10 from Slidell to the Louisiana-Mississippi line) and taken from properties registered in the CNCP can be included in this program.

KEEP FOR YOUR RECORDS

- Nutria may be taken by trap, rifle, or shotgun. If using a shotgun, only steel shot no larger than F-steel may be used. Nutria may not be harvested from water bodies if participant does not have permission to harvest from land adjacent to water bodies.
- During gun deer season on public lands, anyone taking nutria must display 400 square inches of “Hunter Orange” or “Blaze Pink” and wear a “Hunter Orange” or “Blaze Pink” cap or hat.
- Participants must dispose of nutria carcasses in a manner to prevent consumption by birds
 - If leaving nutria carcass in waterways must cut open the belly so carcass sinks
 - Bury or place carcasses in heavy overhead vegetation so completely hidden
 - Remove carcass from the trapping/hunting area if being sold whole for fur or meat or donated to CNCP for LSU research – Contact CNCP at 337-735-8675 for list of fur/meat dealers
- Participants and assistants must carry their CNCP registration card when harvesting nutria for the CNCP and when delivering nutria tails to collection stations. Any assistant that is aiding in the harvest of nutria as part of the program must also have a valid Louisiana trapping license. Participants will receive by mail with their CNCP registration card a schedule of locations, dates, and times for tail collections. It is the responsibility of the participants to turn in tails to the collection station during the hours listed on the schedule.
- Only well-preserved nutria tails (iced, frozen, or well-salted) greater than 7 inches in length will be accepted. Nutria tails must be preserved in a manner that allows counting individual tails (cannot be frozen together in a block).
- All nutria tails in possession must be delivered by the participant or assistant by the last day of collection for the 2024-2025 season. Possession of detached nutria tails outside of the CNCP season, even if the nutria were harvested during the season, is a violation of CNCP rules.
- Participants will sign the receipt/voucher provided at the collection station to acknowledge the number of tails presented and accuracy of information provided. Checks will be mailed to the address we have on file and under no circumstances will participants be allowed to pick up checks from LDWF or its contractor.
- Nighttime (one-half hour after official sunset to one-half hour before official sunrise) hunting on private land from November 20 to the last day of February is allowed with a permit. Permit must be obtained through your regional LDWF Enforcement Office. Permit holders must carry written permission from landowner while hunting and must notify their regional Enforcement Office 24-hours prior to night hunting.
- Nighttime (one-half hour after official sunset to one-half hour before official sunrise) hunting on private land during the month of March is allowed without a permit. Participant must carry written permission from landowner while hunting and must notify the sheriff’s office of the parish where harvesting 24-hours prior to night hunting.
- No LDWF employee may participate in the CNCP. By signing below, you certify that you are not an employee of LDWF.

**CERTIFICATION OF RECEIPT OF COASTWIDE NUTRIA CONTROL PROGRAM
SERVICE AGREEMENT**

2024-2025

I HAVE READ THE PRECEDING AND UNDERSTAND THAT BY SIGNING BELOW I AGREE TO THE TERMS AND CONDITIONS OF THIS AGREEMENT.

Date: _____

Name: _____

Participant Signature: _____

Please return completed application to:
LDWF
Attn: CNCP
200 Dulles Drive, Rm. 1013
Lafayette, LA 70506

Form **W-9**
(Rev. August 2013)
Department of the Treasury
Internal Revenue Service

**Request for Taxpayer
Identification Number and Certification**

Give Form to the
requester. Do not
send to the IRS.

Name (as shown on your income tax return)

Business name/disregarded entity name, if different from above

Check appropriate box for federal tax classification:
 Individual/sole proprietor C Corporation S Corporation Partnership Trust/estate
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____
 Other (see instructions) ▶ _____

Exemptions (see instructions):
 Exempt payee code (if any) _____
 Exemption from FATCA reporting code (if any) _____

Address (number, street, and apt. or suite no.)
 City, state, and ZIP code
 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number

			-				-				
--	--	--	---	--	--	--	---	--	--	--	--

Employer identification number

		-									
--	--	---	--	--	--	--	--	--	--	--	--

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below), and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.



Sign Here Signature of U.S. person ▶ _____ Date ▶ _____

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. The IRS has created a page on www.irs.gov/w9 for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

withholding tax on foreign partners' share of effectively connected income, and

- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.