



PRIVATELY OWNED CERVIDAE FACILITY

SUMMARY INVENTORY REPORT

*Issued under the authority of Executive Order No. 2004-3 and Act 190 of P.A. 2000.
Failure to comply with the requirements of Act 190 may result in fines, imprisonment, or both.*

Reporting Period:	
FROM	January 1, 20
TO	December 31, 20

This Summary Inventory Report (original) must be received by the MDNR (address indicated below) no later than January 15 for the previous calendar year.

Registrant Name	Telephone	Date Prepared
Mailing Address	Herd Number	
City, State, ZIP		
Facility Name	Telephone	
Facility Address		
City, State, ZIP		

SPECIES – Indicate species and complete separate report for each Cervidae species.

Elk	Fallow	Moose	Muntjac	Mule Deer
Red Deer	Reindeer	Sika	Whitetail	Other, Specify _____

January 1	Beginning Inventory Totals	_____	Comments, if any
	<u>Number of Animals Added</u>		_____
	Birth(s) +	_____	_____
	Purchase(s) +	_____	_____
	Non-Purchase Transfer(s) +	_____	_____
	Subtotal =	_____	_____
	<u>Number of Animals Removed</u>		
	Death Non-Sale(s) – Illness or Accident (-)	_____	_____
	Death Non-Sale(s) – Personal Consumption or Donation (-)	_____	_____
	Death Sale(s) – Harvested Animals (-)	_____	_____
	Live Sale(s) (-)	_____	_____
	Live Non-Sale Transfer(s) (-)	_____	_____
	Escape – Not Returning (-)	_____	_____
	Subtotal =	_____	_____
December 31	Ending Inventory Totals =	_____	_____

Mail to:
PERMIT SPECIALIST - WILDLIFE DIVISION
MICHIGAN DEPARTMENT OF NATURAL RESOURCES
PO BOX 30444
LANSING MI 48909-7944

I certify by my signature below that I am ultimately responsible for adhering to the requirements of this registration and that the information contained herein and all attachments are true and correct to the best of my knowledge.

 Registrant Signature Date