

DIVISION OF FISHERIES & WILDLIFE

1 Rabbit Hill Road, Westborough, MA 01581 p: (508) 389-6300 | f: (508) 389-7890 M A S S . G O V / M A S S W I L D L I F E

Application to Addle Canada Goose Eggs in Massachusetts - Valid March 1 to June 30

(Please print clearly or type all information)

| Name of Applicant: | | |
|--|-------------------------------------|------------------------------------|
| Address: | | |
| Town: | | Zip Code: |
| Telephone Number: | | Fax Number: |
| Email address: | | |
| Names and addresses of persons authorized other than the Owner/Tenant/Manager (if any): | | |
| | | |
| | | |
| Location of site to addle eggs (if different from above): | | |
| | | |
| Do you own or lease th | e location where nests are located? | ☐ Owner ☐ Tenant ☐ Other (explain) |
| Briefly describe the situation (nature of problem: residential, agricultural, or commercial). Include the estimated number of nests on the property and any past attempts to address the problem. Add additional sheets if necessary. | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Sign | ature of Applicant | Date |

Please return completed form to: MassWildlife

Attn: Susan McCarthy 1 Rabbit Hill Road

Westborough, MA 01581

Questions? Call (508) 389-6326 or email susan.e.mccarthy@mass.gov