



## Application for Transfer of Trap Identification Number

Trap Identification Number to Transfer: WY - \_\_\_\_\_ - \_\_\_\_\_

Trap ID Number Currently Assigned to:

\_\_\_\_\_  
Last Name                      First Name                      /                      /  
DOB (dd/mm/yyyy)

\_\_\_\_\_  
Signature of Person Currently Assigned Trap ID Number – or \*Legal Representative / Printed Name  
\*Attach verifying documentation

### Person Applying for Transfer:

\_\_\_\_\_  
Last Name                      First Name                      MI

\_\_\_\_\_  
Mailing Address                      Physical Address

\_\_\_\_\_  
City                      State                      Zip Code

Email Address: \_\_\_\_\_

Birthdate (dd/mm/yyyy): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Phone Number: \_\_\_\_\_

Driver's License Number & State \_\_\_\_\_

Trap identification numbers shall consist of the prefix WY, followed by the last two digits of the calendar year in which the number is issued, followed by a number generated by the Department. A hyphen shall separate the three (3) portions of the number. For example, the first trap identification number issued in calendar year 2021 shall be **WY-21-001**. Numbers shall be legible, at least one-eighth (1/8) inch in height, and affixed to traps in such a manner as to read left to right. The numbers shall be stamped on the trap or on a metal tag that is affixed to the trap.

Check this box only if you would like your email address, year of birth, and telephone number made available as public information as per state law (W.S. § 23-1-706). Other information provided may be made available as public information except as otherwise provided by law (trap identification numbers pursuant to statute are solely for the use of the Department or appropriate law enforcement officers and are not a public record).

By checking this box and signing below, under penalty of prosecution, I swear and affirm that the information given by me on this application is true and correct.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE

For further information, please refer to W.S. §23-2-303 or Commission Regulation, Chapter 4, Furbearing Animal Hunting or Trapping Seasons.

Note: Please mail completed application to: Wyoming Game and Fish Department  
Attn: Wildlife Division  
5400 Bishop Blvd.  
Cheyenne, WY 82006

(You may scan & email completed and signed application to: [wgf.permitting@wyo.gov](mailto:wgf.permitting@wyo.gov))

Department use only: Assigned Trap Number \_\_\_\_\_