

Chronic Wasting Disease
TAXIDERMY LOG
TALLY SHEET

(Notice: This Tally Sheet MUST accompany the Specimen Sheets for all specimens of Genus Cervus and Genus Odocoileus handled by the taxidermist during the calendar year)

{Please Refer To The Instructions BEFORE Completing This Form}

1. Name of Taxidermist: _____

Address: _____

City: _____ State: _____ Zip Code: _____

2. DEC Region: _____ 3. County: _____

The Taxidermy Log Tally Sheet MUST BE completed by the taxidermist covering all specimens recorded on the Taxidermy Log Specimen Sheets for the calendar year. Each Specimen Sheet has space for TWO specimens to be reported. Copies of blank specimen sheets can be used to record information for additional specimens. Please complete the Specimen Sheet as per the Instructions For Taxidermy Log (Chronic Wasting Disease) Specimen Sheet.

Original completed Taxidermy Log Specimen Sheets for all specimens of Genus Cervus and Genus Odocoileus handled must be retained at your shop or place of business for 6 years .

When submitting your Taxidermy Log for the calendar year please complete the information below and ATTACH copies of all your Taxidermy Log Specimen Sheets.

4. Calendar Year Of The Attached Records: _____

5. Total Number of Specimens Reported For Calendar Year: _____

NOTICE: Pursuant to ECL Section 3-0301(2)(Q) False statements made on this form are punishable pursuant to Section 210.45 of the New York State Penal Code. I hereby acknowledge that the information I provided on this form is accurate:

Date:

Signature of Taxidermist:

New York State Department of Environmental Conservation
Chronic Wasting Disease

**TAXIDERMISTRY LOG
SPECIMEN SHEET**

Name of Taxidermist: _____ Page ____ of ____

Specimen ____ of ____:

a. Common Name: _____ b. Description of Specimen: _____

c. Name of Person Who Submitted Specimen: _____

d. Address: _____

e. Telephone Number: _____ f. Date Received By Taxidermist: _____

g. Hunting License Number OR Carcass Tag Number: _____ h. State: _____

i. County: _____ j. Town: _____ k. Date: _____

Specimen ____ of ____:

a. Common Name: _____ b. Description of Specimen: _____

c. Name of Person Who Submitted Specimen: _____

d. Address: _____

e. Telephone Number: _____ f. Date Received By Taxidermist: _____

g. Hunting License Number OR Carcass Tag Number: _____ h. State: _____

i. County: _____ j. Town: _____ k. Date: _____

NOTICE: Pursuant to ECL Section 3-0301(2)(Q) False statements made on this form are punishable pursuant to Section 210.45 of the New York State Penal Code. I hereby acknowledge that the information I provided on this form is accurate:

Date:

Signature of Taxidermist:

INSTRUCTIONS For TAXIDERMY LOG

Tally Sheet & Specimen Sheet

Chronic Wasting Disease

All persons who engage in the art or operation of preparing, stuffing, and mounting the skins or other parts of animals of the **Genus Cervus (Elk family)** or the **Genus Odocoileus (Deer family)** must maintain in their shop or place of business a Taxidermy Log (Chronic Wasting Disease) pursuant to 6 NYCRR Part 189.8(b). Each annual log will be comprised of **SPECIMEN SHEETS** containing a description of each specimen of the Genus Cervus or Genus Odocoileus received. Taxidermy logs for the current year and the previous 5 years shall be maintained at the taxidermy shop or place of business.

- A. **DO NOT** enter data for previously mounted specimens brought in for refurbishing.
- B. **Do** type or print Legibly using Black Ink Only.
- C. **Do** complete all sections for each specimen.

The following instructions correspond numerically with the numbers on the **Taxidermy Log (Chronic Wasting Disease) Tally Sheet**. Please provide the information requested below:

- 1. Name and address of the taxidermist preparing the Log.
- 2. DEC Region where the taxidermist resides.
- 3. County where the taxidermist resides.
- 4. Calendar Year when the specimens were reported.
- 5. Total Number of specimens reported in the calendar year.

The taxidermist completing the Log MUST date and sign the NOTICE at the bottom of the Tally Sheet.

The following instructions correspond numerically with the numbers on the **Taxidermy Log (Chronic Wasting Disease) Specimen Sheet**. For each specimen received by the taxidermist the taxidermist must complete one specimen report on the specimen sheet. A maximum of two specimens may be included on each specimen sheet. Blank specimen sheets may be photocopied for additional specimens. Please provide the information requested below for each specimen:

- a. Common name of the species (animal) received for mounting.
- b. Brief description of the specimen (head, skin, feet etc.)
- c. Name of person submitting the specimen.
- d. Address of person submitting the specimen.
- e. Telephone number of the person submitting the specimen.
- f. Date the specimen was received by you.
- g. Hunting license number or carcass tag number used by the person who took the specimen.
- h. State where the animal was taken.
- i. County where the animal was taken.
- j. Town where the animal was taken.
- k. Date the animal was taken.

The Taxidermy Log (Chronic Wasting Disease) **MUST** be updated within 48 hours of the receipt of each animal or specimen.

Within thirty (30) days of the end of the calendar year, the taxidermist must submit complete and accurate photocopies of the Taxidermist Log (Chronic Wasting Disease) comprised of a Tally sheet and Specimen sheets for the previous calendar year. Copies must be sent to: New York State Department of Environmental Conservation, Division of Fish, Wildlife and Marine Resources, Special Licenses Unit, 5th Floor, 625 Broadway, Albany, NY 12233-4752. Phone: (518) 402-8985