

POLICE DEPARTMENT

"An Internationally Accredited Agency"

David W. Haren

Chief of Police



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APPLICATION FOR DEER MANAGEMENT PROGRAM PERSONAL INFORMATION

Name		Phone #:			
Address					
Email:			Driver's License #		
	EME	RGENCY CONTA	CT INFORMATION		
Name		Phone #:			
Address					
		VEHICLE INFO	ORMATION		
Make	Model	Year	License Plate	Color	
	EQUIPMEN	T INFORMATION	(*All arrows must be the sa	ame)	
Make of Bow or C	Crossbow				
		Fletching Color(s)			
Nock Color		Crest Color(s)Broadhead Type		pe	
I also understand well as suspensio written permission	that any violation of on of my hunting privan.	the regulations will revileges in Heath. If yo	arding the deer management p sult in the revocation of my p u are hunting on private pro	permit and possible arrest as perty, attach a copy of your	
rippiicum Signata			Dutc _		
Stamp and Si	ignature from P	ro-Formance Arc	hery (2984 Mt. Vernon I	Rd, Newark, OH 43055)	
		For office u			
Deer Managemen	t Coordinator Signatu	ure	Chief of Police Signature		