
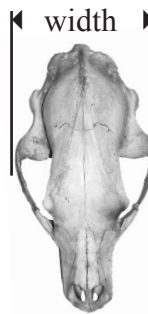




**POLAR BEAR  
TAGGING  
CERTIFICATES**

		<b>DEPARTMENT OF THE INTERIOR</b> <b>U.S. FISH &amp; WILDLIFE SERVICE</b> <b>POLAR BEAR CERTIFICATE #</b>		<small>OMB Control No. 1018-0066 Expires #####</small>
		Tagging Date _____ (1)		
Hide Tag Number _____ (2)		Skull Tag Number _____ (3)		
Tagging Location _____ (4)		Village Hunted From (if Different) _____ (5)		
<b>Age Class</b>	<b>Sex</b>	<b>Sex Verified by Tagger:</b>	<b>Skull Measurements 1/8"</b>	
Adult _____ (6)	Male _____ (7)	Yes _____ No _____	Length _____ (9)	
Sub Adult _____		Sex Confirmed With:	Width _____	
Cub of Year _____	Female _____	Penis Sheath/Hairs _____ (8)	Not Provided _____	
1 Year old _____	Unknown _____	Vaginal Orifice/Teats _____		
2 Year Old _____		Not Confirmed _____		
Cubs Present With Sow (10)		Specimens Collected (12)	Research Marks/Tags	
Yes _____ No _____		Tooth _____ Hair _____	Collar _____ (13)	
How many Cubs _____		Skin _____ Liver _____	Ear Tag # _____	
Bear Condition (11)		Fat _____ Muscle _____	Lip Tattoo _____	
Obese _____		Skin/Muscle _____	Other _____	
Average _____		Baculum/Penis Bone _____		
Skinny _____		Other _____		
Date of Kill _____ (14)		Location of Kill (Specific) _____ (15)		
GPS: Lat. _____ (16)		Long. _____		
Conflict or Problem Bear? Yes / No (17) Defense of Life? Yes / No				
Hunter Available for Post Hunt Interview? (Yes / No) Phone # _____				
Remarks: _____ (18)				
Signature of Tagger _____ (19)				
Name of Hunter (Print) _____ (20)				
Signature of Hunter _____ (21)				
<b>Instructions on Inside of Front Cover</b> WHITE-ORIGINAL PINK-HUNTER'S COPY YELLOW-TAGGER'S COPY				



**INSTRUCTIONS FOR POLAR BEAR FORM**

1. Date when tagging takes place.
2. Number from tag attached to the hide.
3. Number from tag attached to the skull.
4. Village where hide and skull are tagged.
5. Village where bear was harvested if different than tagging village.
6. Estimated age class of polar bear: Adult; Sub Adult, Cub.
7. Sex of animal.
8. How sex of bear was determined?
9. Measure skull with calipers and record length (distance between base of skull and upper front teeth); width (distance between zygomatic arch bones), and total to the nearest 1/8th of an inch (see example above).
10. Record if cubs were present when tagged bear was killed.
11. Record the body condition of the harvested bear.
12. Record biological specimens collected, preserved and presented to tagger.
13. Record any research tags/marks tattoos or collars on bear.
14. Record the date when this polar bear was killed; month, day, and year.
15. Identify specifically where this polar bear was killed. Record the distance from nearest village, river, bay, etc.
16. Enter the GPS coordinates of kill location.
17. Was this a problem bear? Was the bear killed in defense of life?
18. Enter any other information that may be important, for example, any unusual condition or behavior of the polar bear.
19. The tagger signs here.
20. Print the name of the hunter.
21. The hunter or owner signs here.

**After completing certificate, give pink copy to hunter, return white copy to our office, U.S. Fish and Wildlife Service / Marine Mammals Management Marking, Tagging, and Reporting 1011 East Tudor Road MS341 Anchorage, AK 99503 and retain the yellow copy in book for your records.**



**DEPARTMENT OF THE INTERIOR  
U.S. FISH & WILDLIFE SERVICE  
POLAR BEAR CERTIFICATE #**

OMB Control No. 1018-0066  
Expires #####

Tagging Date \_\_\_\_\_

Hide Tag Number \_\_\_\_\_ Skull Tag Number \_\_\_\_\_

Tagging Location \_\_\_\_\_

Village Hunted From (If Different) \_\_\_\_\_

Age Class	Sex	Sex Verified by Tagger:	Skull Measurement 1/8"
Adult _____	Male _____	Yes ____ No ____	Length _____
Sub Adult _____		Sex Confirmed With:	
Cub of Year _____	Female _____	Penis Sheath/Hairs _____	Width _____
1 Year Old _____	Unknown _____	Vaginal Orifice/Teats _____	Not Provided _____
2 Year Old _____		Not Confirmed _____	

Cubs Present With Sow	Specimens Collected	Research Marks/Tags
Yes ____ No ____	Tooth _____ Hair _____	Collar _____
How Many Cubs _____	Skin _____ Liver _____	Ear Tag # _____
<b>Bear Condition</b>	Fat _____ Muscle _____	Lip Tattoo _____
Obese _____	Baculum/Penis Bone _____	Other _____
Average _____	Other _____	
Skinny _____		

Date of Kill \_\_\_\_\_ Location of Kill (Specific) \_\_\_\_\_

GPS: Lat. \_\_\_\_\_ Long. \_\_\_\_\_

Conflict or Problem Bear? Yes / No      Defense of Life? Yes / No

Hunter Available for Post Hunt Interview? (Yes / No) Phone # \_\_\_\_\_

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Tagger \_\_\_\_\_

Name of Hunter (Print) \_\_\_\_\_

Signature of Hunter \_\_\_\_\_

**Instructions on Inside of Front Cover**  
WHITE-ORIGINAL    PINK-HUNTER'S COPY    YELLOW-TAGGER'S COPY

## NOTICES

### PRIVACY ACT STATEMENT

**Authority:** 16 U.S.C. 1361-1407, as amended; 50 CFR § 18.23(f).

**Purpose:** FWS will use this information to monitor marine mammal harvests.

**Routine Uses:** This information may be shared in accordance with the Privacy Act of 1974 and the routine uses identified in System of Records Notice INTERIOR/FWS-30, Marine Mammals Management, Marking, Tagging and Reporting Program.

**Disclosure:** Furnishing this information is voluntary; failure to provide all the requested information may limit FWS' ability to monitor marine mammal harvests.

### PAPERWORK REDUCTION ACT STATEMENT

In accordance with the Paperwork Reduction Act (44 U.S.C. 3501), the U.S. Fish and Wildlife Service collects information necessary to monitor the subsistence harvest of polar bears and will be used to obtain essential biological data necessary to manage the species, and to respond to requests made under the Freedom of Information Act and the Privacy Act of 1974. Information requested in this form is voluntary. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. OMB has approved this collection of information and assigned Control No. 1018-0066.

### ESTIMATED BURDEN STATEMENT

The relevant burden to report information required on this form and have the specified parts marked or tagged is 15 minutes, including time for reviewing instructions, gathering and maintaining data and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of the form to the Service Information Clearance Officer, U.S. Fish and Wildlife Service, U.S. Department of the Interior, 5275 Leesburg Pike, MS: PRB/PERMA (JAO), Falls Church, VA 22041-3803, or via email at [Info\\_Coll@fws.gov](mailto:Info_Coll@fws.gov). Please do not send your completed form to this address.

### FREEDOM OF INFORMATION ACT STATEMENT

For organization, businesses, or individuals operating as a business (i.e., permittees not covered by the Privacy Act), we request that you identify any information that should be considered privileged and confidential business information to allow the Service to meet its responsibilities under FOIA. Confidential business information must be clearly marked "Business Confidential" at the top of the letter or page and each succeeding page and must be accompanied by a non-confidential summary of the confidential information. The non-confidential summary and remaining documents may be made available to the public under FOIA [43 CFR 2.13(c)(4), 43 CFR 2.15(d)(1)(i)].

### APPLICATION PROCESSING FEE

There is no fee associated with this form.