

**Sterile Triploid Grass Carp Information Required for
IDNR Permit (Please have this information ready for us
when placing an order for grass carp)**

Pond Owners Name _____

Mailing Address _____

Phone Number _____

Legal Description of Pond : Pond Name _____

County _____

(Township/Range/Section) T _____ R _____ S _____

(e.g., T9S R4W S20)

Pond Size in acres _____