



2025 Nonresident Trapper's Reciprocity Affidavit

MCA 87-2-603

RETURN TO: FWP LICENSING – PO BOX 200701 HELENA MT 59620-0701

Nonresident Trapper's Licenses must be completed and purchased online at ols.fwp.mt.gov or at an FWP Regional office. You must provide all required information below to qualify for reciprocity.

- 1) NAME: _____
- 2) DATE OF BIRTH (MM/DD/YYYY) & ALS#: _____
- 3) MAILING ADDRESS(LEGAL RESIDENCE- INCLUDE ZIP AND STATE): _____

- 4) FURBEARER SPECIE(S) YOU INTEND TO TRAP: _____

SIGNATURE OF TRAPPER DATE

PART B: REQUIRED DOCUMENTATION:

- Submit documentation that the applicant's state of residence issues nonresident trapping licenses that allow Montana residents to trap the same species for which the person seeks to trap in Montana. **OR**
- Attest on this affidavit that the person's state of residence does not offer reciprocity for trapping fur-bearing species the person seeks to trap in Montana because the species does not exist in the resident state; **AND**
- Provide evidence that the person completed a trapping education course that is equivalent to the trapping education requirements for residents.

Part C: Notarization:

NOTARIAL ACKNOWLEDGEMENT

State of _____
County of _____

The attached Nonresident Trappers Reciprocity form and supporting documents, consisting of _____ pages was **acknowledged** before me on _____ by _____
_____, (Date)
(Name of signer(s))

(Notary's Signature)

[Affix stamp above]