

**APPLICATION FOR NORTH CAROLINA
STATE RECORD FISH**

(PLEASE PRINT OR TYPE)

SPECIES (Common Name) _____

WEIGHT (lbs./ozs.) _____ LENGTH (in.) _____ GIRTH (in.) _____

CATCH LOCATION _____

CATCH DATE (yy/mm/dd) _____

ANGLER _____

ADDRESS _____

HOME PHONE: _____ WORK PHONE: _____

LURE or BAIT _____ ROD _____ REEL _____

SCALES LOCATION (Complete address)

DATE LAST CERTIFIED _____

NAME OF WITNESS TO WEIGHING _____

ADDRESS _____

ANGLER'S SIGNATURE _____

BIOLOGIST'S SIGNATURE OF CERTIFICATION _____

APPLICANT MUST MAIL APPLICATION WITH A FULL SIDE VIEW PHOTO OF FISH TO:

**NCWRC - DIVISION OF INLAND FISHERIES
1721 MAIL SERVICE CENTER
RALEIGH, NC 27699-1721**

APPLICANT WILL BE NOTIFIED BY MAIL IF THE RECORD HAS BEEN ACCEPTED.
TO INQUIRE, PLEASE CALL (919) 733-3633.