

MONTANA DEPARTMENT OF NATURAL RESOURCES AND CONSERVATION  
**APPLICATION**  
**FOR**  
**SPECIAL RECREATIONAL USE LICENSE FOR OUTFITTING**  
**(\$25.00 Non-Refundable Application Fee Required)**

Applicant Name: \_\_\_\_\_ Business Name: \_\_\_\_\_  
Last First M.I.

Outfitter License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(Street/PO Box) (City) (State) (Zip)

Phone: \_\_\_\_\_

Type of License Requested (Check One): \_\_\_\_\_ EXCLUSIVE (1-5 YEARS) \_\_\_\_\_ NON-EXCLUSIVE (1 YEAR ONLY)

Term of License Request (1 to 5 years): \_\_\_\_\_ year(s)

Purpose of License: \_\_\_\_\_ HUNTING AND FISHING \_\_\_\_\_ HUNTING ONLY \_\_\_\_\_ FISHING ONLY

Type(s) of game/fowl to be hunted: \_\_\_\_\_

Period of Requested Use:

(FOR HUNTING) \_\_\_\_\_ to \_\_\_\_\_  
month day month day

(FOR FISHING) \_\_\_\_\_ to \_\_\_\_\_  
month day month day

Is this request identical to a previous Special Recreational Use License (Yes or No)? \_\_\_\_\_ (If yes, attach copy of previous license to this application or provide previous license number below).

Previous Special Recreational Use License Number \_\_\_\_\_

**Legal Description of Requested Use Area:** (APPLY FOR ONLY THOSE TRACTS THAT YOU CAN LEGALLY ACCESS)

SEC. _____ TWP. _____ RGE. _____ COUNTY _____	SEC. _____ TWP. _____ RGE. _____ COUNTY _____
SEC. _____ TWP. _____ RGE. _____ COUNTY _____	SEC. _____ TWP. _____ RGE. _____ COUNTY _____
SEC. _____ TWP. _____ RGE. _____ COUNTY _____	SEC. _____ TWP. _____ RGE. _____ COUNTY _____
SEC. _____ TWP. _____ RGE. _____ COUNTY _____	SEC. _____ TWP. _____ RGE. _____ COUNTY _____
SEC. _____ TWP. _____ RGE. _____ COUNTY _____	SEC. _____ TWP. _____ RGE. _____ COUNTY _____
SEC. _____ TWP. _____ RGE. _____ COUNTY _____	SEC. _____ TWP. _____ RGE. _____ COUNTY _____

(Attach additional sheets if necessary. Also, please include a map(s) showing all areas requested, including campsites, access roads/trails, parking areas, etc.)

Number of Guides/Employees: \_\_\_\_\_

No. of clients per hunt: \_\_\_\_\_ No. of outfitted hunts: \_\_\_\_\_ Rate charged per client per hunt: \$ \_\_\_\_\_

No. of clients per fishing trip: \_\_\_\_\_ No. of fishing trips: \_\_\_\_\_ Rate charged per client per trip: \$ \_\_\_\_\_

Is a campsite(s) requested? Yes \_\_\_\_\_ No \_\_\_\_\_ Number of campsite(s) \_\_\_\_\_

**TYPE AND LOCATION OF CAMPSITE(s):**

Perm. \_\_\_\_\_ Temp. \_\_\_\_\_ ¼ ¼ SEC. \_\_\_\_\_ TWP. \_\_\_\_\_ RGE. \_\_\_\_\_ COUNTY \_\_\_\_\_

Perm. \_\_\_\_\_ Temp. \_\_\_\_\_ ¼ ¼ SEC. \_\_\_\_\_ TWP. \_\_\_\_\_ RGE. \_\_\_\_\_ COUNTY \_\_\_\_\_

(Attach additional sheets if necessary)

Will riding/pack stock be used? Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\*\*\*\*\*  
APPLICATION REVIEW  
(To Be Completed By Department)

Application No. \_\_\_\_\_ Rental (\$): \_\_\_\_\_

Date Application Received: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

Is an Environmental Review Required? Yes \_\_\_\_\_ No \_\_\_\_\_ Does this request overlap other requests? Yes \_\_\_\_\_ No \_\_\_\_\_  
(If yes, provide a list of other application/license(s) being overlapped):

Completed By: \_\_\_\_\_ Date \_\_\_\_\_

Special Stipulations/General Comments :

