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Mississippi Department of Marine Resources Special Permit Annual Report

Permittee Name and Organization:	Date:	Permit Type (select one): <input type="checkbox"/> Scientific Research <input type="checkbox"/> Non-Profit Organization Harvesters <input type="checkbox"/> Marine Brood Stock Collection <input type="checkbox"/> Experimental Gear/Underutilized Species
	Phone:	
	E-mail:	
Permit Number:		
Date of each sampling event:		
Sampling locations (attach map with lat/long coordinates):		
Species collected (include number of each species):		
Types of gear used:		
Summary of work conducted under this permit:		
Provide research papers/technical reports resulting from this project (if not available, provide name and anticipated date):		
Deposition of collected specimens/samples (if applicable):		
Signature of permittee:		Date:

Please attach sampling data with this report (including all measurements/hydrology).