DMAP UNIT#

PENNSYLVANIA GAME COMMISSION 2025 DEER MANAGEMENT ASSISTANCE PROGRAM (DMAP)

REGULAR LANDOWNER/LESSEE APPLICATION

APPLICATION MUST BE POSTMARKED BY JULY 1, 2025

each landowner)

Applican	t Name and Contact Informat	<u>ion</u>		(if applicable/known)
	First	M.I.	Last	Suffix (Jr., Sr.)
	Name of Organization	, Political Subdivision, or Agency (if applicable)	
Applicant	Address: (or address to which yo	ou want coupons mailed, i	if applicable)	
	Street			
	City		State	Zip
Applicant	Contact Information:			
	()	(Evening Phone Nu	mber
	Email Address (providing your email	address will enable PGC to send you remi	nders to reapply and instructions	to reapply online)
DMAP Pr	roperty Address:	e as applicant address above		
	Street			
	City		State	Zip
Property (GPS Coordinates (decimal degrees	, e.g., 40.262, -76.883):		
	applicant (check one)			
	Private Landowner (Example: a			
	Public Official or Employee (of a Federal or State agency or munic		rized officer or emplo	oyee applying on behalf
	Agriculture Lessee (A "Landow for each landowner)	rner Authorization Form" or	page 6 of this applic	ation must be completed
	Joint Applicant (A "Landowner	Authorization Form" on pag	ge 6 of this application	n must be completed for

2025 DEER MANAGEMENT ASSISTANCE PROGRAM

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Type of Prop	erty (check one)										
	ivate Land blic Land										
	inting Club (see	Instruc	tions for el	igibility r	equire	ments)					
	e of county or co						•		If prope	erty i	is located in
	Name of County	PGC Use Only	Township	PGC Use Only		wnship	PGC Use Only	Townsl	U	GC Ise Only	More than 3 townships? (Check here)
County #1											
County #2											
County #3											
More than 3	counties? (check	here)						l .			
☐ Ye ☐ No Is this proper ☐ Ye ☐ No	ty open to publics ty enrolled in thes TE main reason	e Hun	ter Acces	s Progra		ormerly ki Deer Ma			c Access))? (C	Check one)
☐ Urban/suburban deer management ☐ Biodiversity ☐ Agricultural Damage ☐ Other; Please specify											
□ Agricuitu	rai Damage				er, r	iease spe	ecity _				
FOR OFFICIAL	L USE ONLY										
Reviewing Biologist Employee #	Region WCO No. District No.		CO ict No. WM	MU1 W	MU 2	License Year	Cour Appro	oons	Assigned Di Unit # (Rec once entered DMAP Sys	cord d into	DMAP Application Number provided by system.
			Agri	iculture	Joint	,					

2025 DEER MANAGEMENT ASSISTANCE PROGRAM

REGULAR LANDOWNER/LESSEE APPLICATION

Map of DMAP Area: required for every REGULAR application

Please attach a printed map on a separate sheet of paper or a map can be drawn in the box below

Maps must include the following items:

- 1. Identify and describe the boundaries of the DMAP area <u>and</u> how these boundaries are marked <u>on the ground</u> (for example, posted signs, painted trees, flagging tape, fence rows, neighbor's signs, tree blazes, roads, etc.)
- 2. Indicate locations of any buildings on or adjacent to the property. These are safety zones.
- 3. Description of area to include:
 - a. Land cover types (forest, row crops, hayfield, pasture, wildlife food plots, orchards, etc.)
 - b. Huntable areas
 - c. Safety zones
- 4. Nearby roads with road names
- 5. Distance and direction to nearest town, city, or village

(NOTE: You are required to provide a copy of this map to every coupon recipient)

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2025 DEER MANAGEMENT ASSISTANCE PROGRAM

REGULAR LANDOWNER/LESSEE APPLICATION

Property Acro	eage and	DMAP Coupon Request	
Number of acr	es in cor	nmercial or agriculture cultivation (see below for	more details)
Number of acr	es not cu	ltivated	+
Total acres (ad	dd cultive	ated and not cultivated acres)	=
and vegetables food plots, etc.	s is 1 cou , the stan allocati	cultivated land including crops, fruit trees, nurse pon for every 5 acres. For all other lands such as udard issue rate is 1 coupon for every 50 acres. A on less than or equal to the standard issuance rat	s forest, wildlife plantings, pplicants may request a
Total number	of DM	AP coupons requested:	
agricultural lar	nd, fewer	re than the standard number of DMAP coupons, et than 50 acres of other lands, or 2 or more proper plications? (check one)	<u> </u>
□ Yes		Yes, additional questions must be answered associ	iated with a management plan
□ No	(see page 7 or 8 of application)	
Coupon Distr	<u>ibution</u>		
Do you want to	o distrib	ate coupons to hunters? (check one)	
	Yes, I v	ant to distribute coupons directly to hunters v	vhom I choose.
		Email me my coupons as a PDF upon approva	1.
		Print and mail me my coupons. Coupons will be provided in the Applicant Info section on page	
		hunter can get a permit to hunt my property g g system without a coupon. (see form on page	
Required Sign I certify that the		ation I am providing on this application is true, c	orrect, and complete.
Applicant Sign	nature: _		Date:
		se see pages 5-8 as they may be required for your	

MAIL COMPLETED APPLICATION TO THE GAME COMMISSION REGION OFFICE FOR THE COUNTY WHERE THE DMAP UNIT IS LOCATED – SEE PAGE 9 FOR REGION MAILING ADDRESSES. DO NOT MAIL TO THE GAME COMMISSION'S HARRISBURG OFFICE.

This page is required for public landowners and private landowners who want to make their property's information available on the Game Commission's website and via mail.

Publication of Application Information

For public landowner applicants, the names, public contact information (see below), and number of coupons requested will be posted on the Game Commission's website and made available via mail. Please complete the public contact information below as this may be different than the application information provided earlier in this application.

Private landowner and hunting club applicants can be posted to the website with applicant permission. If you would like your public contact information posted on the Game Commission's website and made available via mail, please check the box below and complete the public contact information below.

☐ YES, I give the Game Commission permission to make my property's information available on the Game Commission's website and via mail. (Fill out below)

Public Contact Information

Applicant Nam	ne:			
	First	M.I.	Last	Suffix (Jr., Sr.)
	Name of Organization, P	olitical Subdivision, or Agency		
Applicant Add	ress:			
TT				
	Street			
	City		State	Zip
	()		()	
	Daytime Phone Number		Evening Phone Number	
	Email Address			
	Website Address			

Additional Instructions (up to 255 characters):

This page is required ONLY if the applicant is an <u>Agriculture Lessee</u> or <u>Joint Applicant</u>

Landowner Authorization Form

A Landowner Authorization Form must be completed <u>for every landowner</u> of the property being enrolled by the Applicant.

Landowner	Name and Contact Inform	mation_		
Landowner:				
	First	M.I.	Last	Suffix (Jr., Sr.)
Landowner	Address:			
	Street			
	City		State	e Zip
	() Daytime Phone Number		()_ Evening Phone	Number
Landowner	Permission to Applicant			
I,			. am a/the landow	vner of the property being
	Landowner Name			
enrolled in	the Deer Management A	ssistance Program, an	d I have given perm	nission to
			to enroll my lan	d in DMAP for the
uncoming h	Applicant Name unting seasons.		·	
ar annig n				
Landowner	Signature:		D	ate:

This section is required if this is an application for PRIVATE LAND and:

- 1) you are requesting more than the standard number of coupons or
- 2) you are enrolling 2 or more areas that are within 1 air mile of each other on separate applications or
- 3) you are enrolling fewer than 5 acres of cultivated land or fewer than 50 acres of other lands

Management Plan for PRIVATE LAND DMAP Area

Triumagement Tum Tot Tax (1112 2011)
Responses to the questionnaire can be completed on a separate $8 \frac{1}{2}$ " x 11" sheet of paper, but all the information requested below must be provided.
1. Number of DMAP permits requested?
2. Number of hunters annually hunting area in past:
3. Describe deer management problem on this area. Please provide area specific information to substantiate the deer problem, reason for enrolling 2 or more areas within 1 mile of each other, or requesting DMAP for land areas of less than 5 acres of cultivated land or less than 50 acres of other land. For example, how many deer do you observe on your property, how many deer would you like to observe on your property, describe and quantify amount of damage to crops, forests, and/or landscaping or other deer-related impacts.
4. Describe deer management goals and objectives for this area.
5. Describe how additional DMAP permits will solve the deer problem and achieve management goals and objectives.

This section is required for ALL <u>PUBLIC</u> LAND applications including municipal political subdivisions. Inclusion of scientific references to support objectives, indicators, and measures is strongly recommended.

Subsection questions (i.e., i, ii, etc.) are provided as guidelines to focus information content included in the management plan. All subsection questions should be answered in the affirmative or otherwise clearly explained in the management plan.

PUBLIC LAND MANAGEMENT PLAN CONTENT

- I. Mission Statement of the public entity
- II. **Problem Statement with justification** This should clearly identify the problem and how DMAP will solve the problem. Particular attention should be given to length of time the problem has existed, and actions taken to date and results, including previous DMAP use and results of previous deer hunting activities.
 - i. Is there a clearly stated problem related to deer impact?
 - ii. Can increased antlerless harvest solve the problem?
 - iii. Is the justification based on data?
- III. Goals with rationale as to how they relate to DMAP Goals should explain what is to be achieved (for example, 'we want healthy forest'). Goals should be specific to deer and other wildlife, habitat, and DMAP. Other goals are likely beyond the scope of the DMAP. Within the text of the management plan, the rationale of each goal should be explained and the relationship between the goal and deer impacts should be described.
 - i. Are the goals explained and clearly related to deer impacts?
 - ii. Can increased antlerless harvests meet the goals?
- IV. **Objectives** Objectives should define a specific level of achievement for each goal (for example, 'we will consider forest healthy when plots have adequate regeneration'). Basis for choosing a particular objective and specific level of achievement should be explained.
 - i. Are the objectives directly related to a goal?
 - ii. Are the objectives quantitative?
 - iii. Are the quantities used for each objective supported in the text?
- V. Indicators/Measures This section of the plan will be similar to the methods section of a paper. A description of data to be collected to monitor progress towards goals and thresholds of success will be included.
 - i. Is the analysis to determine whether indicators/measures meet objectives clearly described?
 - *ii.* Do the indicators/measures provide representative samples?
- VI. Non-deer-related factors affecting goals and management actions being taken to address these factors In this section, non-deer factors that could be affecting achievement of goals should be identified. A description of other management actions being taken on the area (historically and at present) to address non-deer factors should be included. Habitat management activities that create early successional habitat should be included.
 - i. Are factors other than deer being addressed?
 - ii. Despite factors other than deer, is an increase in the antlerless harvest justified?

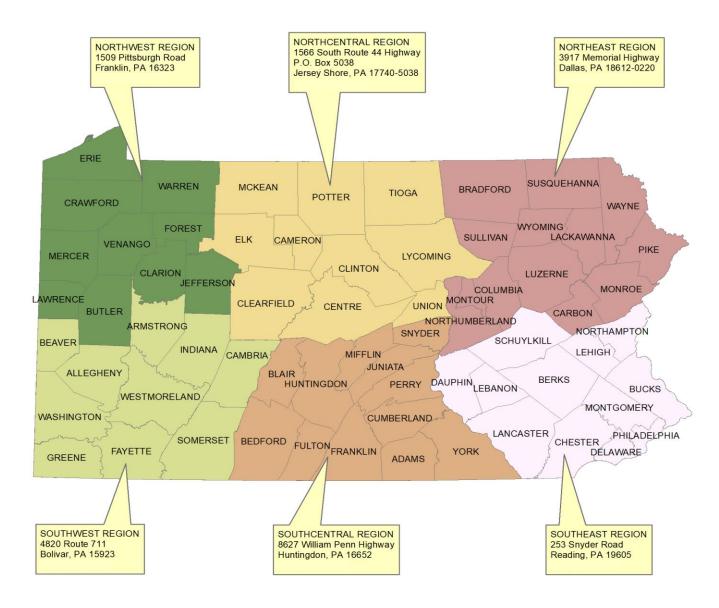
MAILING INSTRUCTIONS:

Mail the following to the appropriate Game Commission <u>Region</u> Office as determined by the county where the DMAP property is located. <u>Applications will not be accepted at the Harrisburg Office</u>.

Applications must be postmarked by JULY 1st

CHECKLIST FOR REGULAR DMAP APPLICATIONS:

- ✓ Completed **and** signed application (pages 1-4)
- ✓ Map of the DMAP area (page 3)
- ✓ Public Contact Information, if required (page 5)
- ✓ Landowner Authorization Form, if required (page 6)
- ✓ Private Lands Management Plan, if required (page 7)
- ✓ Public Lands Management Plan, if required (page 8)



If you have any questions, call 1-833-PGC-HUNT (1-833-742-4868) and ask to speak to your Regional Wildlife Management Supervisor.