



COASTAL RESOURCES DIVISION

ONE CONSERVATION WAY,  
BRUNSWICK, GA 31520

912-264-7218 | COASTALGADNR.ORG

# GEORGIA SALTWATER GAME FISH RECORDS PROGRAM

## APPLICATION FOR STATE RECORD

Prior to completing this application, please read the Georgia Saltwater Game Fish Records Program rules and regulations at CoastalGaDNR.org/SaltwaterRecords. This application must be accompanied by photographs as specified in the Program's rules and regulations. Incomplete applications may be rejected or take longer to process. By completing this application, you agree to allow the Georgia Department of Natural Resources to release to the public photos and relevant information regarding a new record, tie record, or outstanding catch.

### I. ANGLER IDENTITY

Angler name (as you would wish it to appear on your state record certificate): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

\_\_\_\_\_  
*First name Middle initial Last name MM / DD / YYYY*

Permanent address:

\_\_\_\_\_  
*Street Apartment/Unit*

\_\_\_\_\_  
*City County State ZIP*

Phone number: \_\_\_\_\_ Email address: \_\_\_\_\_

\_\_\_\_\_  
*Including area code*

Fishing license information: \_\_\_\_\_ Division of entry (check one): \_\_\_\_\_ Fishing club affiliation (if any): \_\_\_\_\_

\_\_\_\_\_  
*Georgia fishing license number*           MEN           WOMEN

Saltwater Information Program (SIP) Permit expiration date: \_\_\_\_\_  
*MM / DD / YYYY (Note: A valid SIP permit is required by law, O.C.G.A. 27-2-20.1)*

Note: You do not need a fishing license or SIP permit if you are covered under a Georgia Charter/Guide License. To be eligible, you must have been on a paid charter trip when you caught your fish, and the guide must be appropriately licensed. Be sure to include the charter guide's information in Section "IV. Vessel".

### II. CATCH INFORMATION

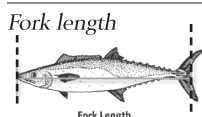
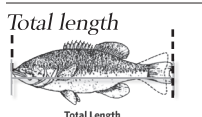
Species (common name): \_\_\_\_\_ Date of catch: \_\_\_\_\_

Place of catch (be specific): \_\_\_\_\_ Method of catch: \_\_\_\_\_

\_\_\_\_\_  
*Trolling, casting, fly fishing, et cetera*

Weight: \_\_\_\_\_ Length (in inches): \_\_\_\_\_ Girth (in inches): \_\_\_\_\_

\_\_\_\_\_  
*Pounds Ounces*



\_\_\_\_\_  
*Distance around the thickest part of body*

### III. EQUIPMENT

Rod: \_\_\_\_\_ Reel: \_\_\_\_\_  
*Make and length* \_\_\_\_\_ *Make* \_\_\_\_\_  
Line: \_\_\_\_\_ Name of lure or type of bait: \_\_\_\_\_  
\_\_\_\_\_  
*Make and test* \_\_\_\_\_  
Terminal rig description: \_\_\_\_\_  
\_\_\_\_\_  
*Number of hooks, type, arrangement* \_\_\_\_\_

### IV. VESSEL (IF APPLICABLE)

Vessel name: \_\_\_\_\_ Vessel captain: \_\_\_\_\_  
\_\_\_\_\_  
*First and last name* \_\_\_\_\_  
Captain's permanent address: \_\_\_\_\_  
\_\_\_\_\_  
*Street* \_\_\_\_\_ *Apartment/Unit* \_\_\_\_\_  
\_\_\_\_\_  
*City* \_\_\_\_\_ *County* \_\_\_\_\_ *State* \_\_\_\_\_ *ZIP* \_\_\_\_\_  
Captain's phone number: \_\_\_\_\_ Captain's signature: \_\_\_\_\_  
\_\_\_\_\_  
*Including area code* \_\_\_\_\_ **X** \_\_\_\_\_

### V. SCALES

Weighmaster's name \_\_\_\_\_ Scale owner: \_\_\_\_\_  
\_\_\_\_\_  
*First and last name* \_\_\_\_\_ *Name of business, fishing club, etc cetera* \_\_\_\_\_  
Physical address of scale: \_\_\_\_\_  
\_\_\_\_\_  
*Street* \_\_\_\_\_ *Unit* \_\_\_\_\_  
\_\_\_\_\_  
*City* \_\_\_\_\_ *County* \_\_\_\_\_ *State* \_\_\_\_\_ *ZIP* \_\_\_\_\_  
Agency of scale certification: \_\_\_\_\_ Date of last scale certification \_\_\_\_\_  
\_\_\_\_\_  
*i.e. Georgia Dept. of Agriculture* \_\_\_\_\_ *MM / YYYY* \_\_\_\_\_  
Weighmaster's phone number: \_\_\_\_\_ Weighmaster's signature: \_\_\_\_\_  
\_\_\_\_\_  
*Including area code* \_\_\_\_\_ **X** \_\_\_\_\_

**VI. EYEWITNESS TO CATCH**

Name of eye witness to catch (other than angler or captain):

\_\_\_\_\_  
*First and last name*

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

Signature of eye witness to catch:

**X**

\_\_\_\_\_  
*Including area code*

**VII. EYEWITNESS TO WEIGHING**

Name of eye witness to weighing (other than weighmaster):

\_\_\_\_\_  
*First and last name*

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

Signature of eye witness to weighing:

**X**

\_\_\_\_\_  
*Including area code*

**VIII. ADDITIONAL COMMENTS**

Fighting time, equipment used, additional witnesses, et cetera:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**IX. ANGLER AFFIDAVIT**

I, the undersigned applicant, hereby take oath and attest that the fish described in this application was hooked, fought, and brought to gaff by me without assistance from anyone, except as specifically provided in the rules and regulations of the Georgia Saltwater Game Fish Program, and it was caught in accordance with the Program's rules and regulations. I further declare that all information in this application is true and correct to the best of my knowledge.

Signature of angler applicant:

Date of signature:

**X**

\_\_\_\_\_  
*MM / DD / YYYY*

**Applicants who lack a valid Georgia fishing license, active Saltwater Information Program Permit, or other necessary permits will be disqualified. The Georgia Department of Natural Resources Law Enforcement Division will check permits as part of this application.**

When this application is completely filled out and signed, mail it with the necessary photos to:

Saltwater Game Fish Records Program  
Coastal Resources Division  
Georgia Department of Natural Resources  
One Conservation Way  
Brunswick, GA 31250

or email the complete application and photographs to **tyler.jones@dnr.ga.gov**

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**AGENCY USE ONLY**

Applicant's name

Date of catch

*First name*

*Middle initial*

*Last name*

*MM / DD / YYYY*

Date application received

Division of entry (check one):

*MM / DD / YYYY*

MEN

WOMEN

Species common name

Genus and species

Current record weight:

Entry weight:

Weight needed:

*Pounds*

*Ounces*

*Pounds*

*Ounces*

*Pounds*

*Ounces*

REVIEW COMMITTEE

	Approve NEW Record	Approve TIE Record	Disapprove Record	Approve Outstanding Catch	Disapprove Outstanding Catch
Tyler Jones Program Coordinator					
Paul Medders Program Advisor					
Jared Flowers Research and Surveys					
Carolyn Belcher Chief of Marine Fisheries					
Doug Haymans Division Director					

Notes