

COLUMBUS COUNTY BEAVER BOUNTY PROGRAM

STEP-BY-STEP PROCESS FOR PARTICIPATION

- Landowner calls or visits the Soil and Water Conservation District office to schedule an appointment for a site visit.
- Absentee landowner(s) can contact the Soil and Water Conservation District office to request a form to participate in Beaver Bounty Program. (See "Absentee Landowner" form – optional)
- A landowner can designate someone other than themselves to act on their behalf by signing the "Assignment of Payment Form".
- District staff schedules an appointment for a site visit with the landowner or their designee.
- Where adjacent landowners are involved, landowner making the request for this service must obtain adjacent landowner written permission for District staff to go on adjacent property to make an assessment.
- Staff evaluates each site according to the ranking form developed by the Beaver Management Committee to determine the public health and human safety issues. (See "Ranking" form. To be completed by District staff.)
- Landowner, or their designee purchases tags and the landowner's name is written on the tags. A receipt is given to the person purchasing those tags with tag numbers listed, the amount paid and the date that the tags will expire. A maximum of 15 tags will be issued per landowner. After those tags are filled, a new evaluation will be needed of the site and approval of the Beaver Management Committee will be necessary in order to receive additional tags.
- A list of participating trappers is given to landowner. (See list of participating trappers)
- If a trapper is not the landowner the trapper must obtain written permission with landowner's signature on it and carry this with them when checking traps. (Written permission to trap on someone else's property is required by state law whether the trapper participates in the bounty program or not. Please see the pocket size permission card. This card is small enough that it can be laminated and carried in the trapper's wallet.)
- The landowner has an option to assign payment to someone other than themselves. Possibly a relative or their trapper. (See "Assignment of Payment" form – optional)
- Landowner, or assigned representative brings the Landowner – Trapper "Certification Form" (see program "Certification Form" – required form) along with both front feet to Beaver Management Committee on the Second or Fourth Monday of the month. These collection times may be changed when a holiday falls on the regularly scheduled collection dates.
- The collected parts must be frozen and in a zip-type bag. The tag should be attached to each individual bag.
- After verification that these beaver were properly collected, a warrant is completed and forwarded to County Finance office.
- If the client is not a vendor with the county, a W-9 form is completed. (One time document unless client's information changes – required form)
- If the bounty exceeds \$200, a Purchase Order is completed. (required)
- Please note that payment may take up to 6 weeks.
- The County Finance office mails the check directly to the landowner or assignee.

COLUMBUS COUNTY BEAVER BOUNTY PROGRAM GUIDELINES

1. The title "Trapper" in this document refers to anyone using a legal means of Beaver management in accordance with the local laws of Columbus County and the laws of the NC Wildlife Commission for Beaver control.
2. Licensed trappers that reside in Columbus County, or landowners removing Beaver on their land located in Columbus County, will receive \$40 for both front feet that are tagged according to these guidelines.
3. Tags will be numbered and color coded (Blue) to represent the Columbus County Beaver Bounty Program.
4. Tags will be as evenly dispersed as possible by the Beaver Management Committee throughout the county. When tag distribution is low in a District, tags may be distributed across other Districts at the discretion of the Beaver Management Committee.
5. Trappers/Landowners must pay a refundable deposit of \$2 per tag. No less than 5 and no more than 15 tags will be issued to a trapper/landowner at a time. This deposit will be refunded to the trapper/landowner along with the bounty according to the request for payment guideline number 16 below. All tags will expire on the date noted on the tag purchase receipt. In order to be reimbursed the deposit, tags must be returned to the Beaver Management Committee on or before this date.
6. Licensed trappers may request the Columbus Soil and Water Conservation District (SWCD) to add them to a Trapper's list. The Trapper's list will be available to landowners through the Columbus Soil and Water Conservation District (SWCD) office.
7. Landowners will contact individual trappers and contract with them using form CC BBP-1 (Landowner – Trapper agreement form).
8. Trappers must obtain landowner signature on the permission forms produced and provided by the Columbus County Beaver Management Committee before tags can be purchased. This landowner permission must be valid for one year.
9. A completed Landowner – Trapper certification form will be kept by the trapper for each landowner and shall be turned in to the Beaver Management Committee when tags are returned for the bounty.
10. This certification form verifies by the landowner and trapper that both of the front feet that are tagged for the bounty were properly taken on property located in Columbus County. Landowner and Trapper understand that spot checks and/or follow-up phone calls will be performed randomly.
11. Landowners and/or trappers making false statements of locations of where beavers were taken may be subject to criminal prosecution and will be banned from participation in the Columbus County Beaver Bounty Program.
12. The Beaver Management Committee will collect both front feet; they must be placed in a zip sealed bag, frozen and tagged only on the 2nd and 4th Monday of each month. (Holiday's falling on these days will change this schedule. Please check with the Columbus Soil and Water Conservation District at 910-642-2196 ext. 3 for rescheduling.) The collection site will be at the Columbus Soil and Water Conservation District office located in the Agriculture Service Center at 45B Government Complex Road, Whiteville, NC. Collection of tagged beaver ears will begin at 6:00 PM.
13. Tagged front feet will only be received in lots of three (3) or more unless a request for payment has been made for all other tags received by the trapper/landowner.
14. A trapper/landowner must use the tags that were previously issued to him/her before receiving additional tags.
15. All trappers/landowners participating in the program must obtain a vendor number with Columbus County Finance office.
16. Request for payment to the trapper/landowner will be made through the Columbus Soil and Water Conservation District to the Columbus County Finance Department. Checks will be paid according to Columbus County Finance policy and procedures. Please allow up to 6 weeks for payment.
17. By signing below, I agree that I have read and understand these guidelines for the Columbus County Beaver Bounty Program.

Signature

Date

LANDOWNER PERMISSION FOR SITE EVALUATION OF POTENTIAL BEAVER ACTIVITY

As a landowner of property in Columbus County, I _____ would like to
(PLEASE PRINT LANDOWNERS NAME)
have my property evaluated for beaver activity therefore; I give permission to the Columbus Soil and Water
Conservation District staff to access my property in order to assess beaver activity.

LANDOWNER INFORMATION

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: (HOME) _____

(CELL) _____

THIS PERMISSION IS GRANTED FOR THE PERIOD OF:

BEGINNING: _____

ENDING: _____

LANDOWNER SIGNATURE

DATE

ABSENTEE LANDOWNER REQUEST TO PARTICIPATE IN COLUMBUS COUNTY BEAVER BOUNTY PROGRAM

As an absentee landowner of Columbus County, I _____ would like to participate in the
(PLEASE PRINT LANDOWNER'S NAME)
Columbus County Beaver Bounty Program.

I give permission to _____ to act on my behalf to have trapping done on
(PLEASE PRINT LANDOWNER'S DESIGNEE'S NAME)
my property in Columbus County therefore; please allow him/her to purchase tags and collect the bounty
from beavers taken from my property for the period as indicated below.

Before a bounty is collected by the trapper, I understand that my designee will be required to certify/verify
that the number of beavers taken from my property is correct.

LANDOWNER INFORMATION		LANDOWNER'S DESIGNEE'S INFORMATION	
NAME: _____		NAME: _____	
ADDRESS: _____		ADDRESS: _____	
CITY, STATE, ZIP: _____		CITY, STATE, ZIP: _____	
PHONE: (HOME) _____		PHONE: (HOME) _____	
(CELL) _____		(CELL) _____	
THIS PERMISSION IS GRANTED FOR THE PERIOD OF:			
BEGINNING _____			
ENDING _____			
LANDOWNER SIGNATURE _____	DATE _____	DESIGNEE'S SIGNATURE _____	DATE _____

COLUMBUS COUNTY BEAVER BOUNTY PROGRAM TRAPPER REGISTRATION FORM

NAME

STREET
ADDRESS

CITY

STATE

ZIP

PHONE

SS #

LICENSE #

DO YOU WANT TO BE ON OUR TRAPPER CALL LIST?

YES

NO

TRAPPERS SIGNATURE

DATE

NOTES

COLUMBUS COUNTY BEAVER BOUNTY RANKING FORM

LANDOWNER'S INFORMATION

NAME			
ADDRESS		CITY	STATE
PHONE		CELL	
DATE OF REQUEST		DATE OF SERVICE	
TRAPPER'S NAME		PHONE	

Is this request along the right of way of a NC Department Of Transportation maintained roadway?

POINT VALUE	CHECK	THIS SITE
----------------	-------	-----------

If yes, refer to USDA - APHIS Wildlife Services. (BMAP)

Yes - Do Not Proceed	0	0
No	15	0

Date referred to USDA.

Date

Is landowner willing to grant permission to trap beavers?

Yes	15	0
No - Do Not Proceed	0	0

Is there evidence of current beaver activity?

Yes	15	0
No - Document Need Below	5	0

Is this application associated?

Beaver Bounty Program

Yes	15	0
No	5	0

Independent Trapper

Yes	5	0
No	5	0

Is there more than 1 dam involved?

Yes	15	0
No	5	0

If yes, how many?

2 to 3

4 or more

10	0	0
15	0	0

What is the most feasible method of removing the dam?

Manual

Mechanical

Heavy Machine

Explosives

15	0	0
10	0	0
10	0	0
5	0	0

What is the hazard classification of the Dam for this program? (Reach effected)

Low - Less than 500 feet

Medium - 500 to 1000 feet

High - Greater than 1000 feet

5	0	0
10	0	0
15	0	0

What is the impacts to Human Health and Safety?

Emergency Access

Home Structure

Septic System

Cemetery

Mosquito Control

Cropland

Yard

Timber

Other (Explain in "Notes" below and verify how the "Points" used are determined.)

20	0	0
20	0	0
20	0	0
20	0	0
15	0	0
15	0	0
10	0	0
10	0	0
10, 15, 20	0	0

What is the Community Benefit?

1 - 2 households effected

Greater than 2 Households

Public Facilities including Commercial Property, Parks and Nature Trails

10	0	0
15	0	0
20	0	0

TOTAL POINTS	0	0
--------------	---	---

NOTES

COLUMBUS COUNTY BEAVER BOUNTY PROGRAM
ASSIGNMENT OF PAYMENT FORM

This Assignment of Payment entered into on this _____ day of _____, 20____

establishes an agreement between _____, (Landowner)
(PLEASE PRINT)

and the Columbus Soil and Water Conservation District that funds normally paid to the

landowner are released to be paid to _____
(PLEASE PRINT)

(Landowner's Designee) for a period of _____ through _____
(DATE) (DATE)

I understand that as the landowner, I must verify/certify the number of beaver removed from
my property before payment is made.

Landowner Information (Please print)

Name: _____

Address: _____

City, State, Zip: _____

Phone: Home: _____ Cell: _____

Landowners Designee's Information (Please print)

Name: _____

Address: _____

City, State, Zip: _____

Phone: Home: _____ Cell: _____

Signatures:

_____, (Landowner) _____, Date
(Signature)

_____, (Landowners Designee) _____, Date
(Signature)

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ Note. For a single-member LLC that is disregarded, do not check LLC, check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
	5 Address (number, street, and apt. or suite no.)	Requester's name and address (optional) Columbus County 111 Washington Street Whiteville, NC 28472
	6 City, state, and ZIP code	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number								
				-				
or								
Employer identification number								
				-				

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶
--------------	-------------------------------	--------

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

COLUMBUS COUNTY BEAVER MANAGEMENT PROGRAM BEAVER BOUNTY PROGRAM CERTIFICATION FORM

LANDOWNER INFORMATION	TRAPPER INFORMATION
NAME: _____	NAME: _____
ADDRESS: _____	ADDRESS: _____
CITY, STATE, ZIP: _____	CITY, STATE, ZIP: _____
PHONE: (HOME) _____	PHONE: (HOME) _____
(CELL) _____	(CELL) _____
PROPERTY ID NUMBER(S): _____	LICENSE NUMBER: _____
DATE OF TRAPPING: _____ THROUGH _____	TRAPPING DATES: _____
NUMBER OF BEAVERS TRAPPED: _____	TAG NUMBER(S): _____
SIGNATURE _____ DATE _____	SIGNATURE _____ DATE _____

DISCLAIMER

I, the landowner of the above identified property, hereby understand that I assume full responsibility for the liability of Beaver trapping on my land and in no way hold Columbus County, its agencies or any committees appointed by Columbus County responsible for any disturbance associated with beaver trapping to my property. I also understand that the information provided on this public document may be subject to disclosure under the North Carolina Public Records Act.

CERTIFICATION

I hereby certify that _____ (Number) Beaver(s) have been taken from Property Number(s) _____ located in Columbus County according to the guidelines of the Columbus County Beaver Bounty Program. I understand that any misrepresentation of these numbers will be considered fraud and; that landowners and/or trappers making false statements of locations of where Beavers were taken will be subject to criminal prosecution and will be banned from participation in the Columbus County Beaver Bounty Program.

LANDOWNER SIGNATURE

DATE

TRAPPER SIGNATURE

DATE

BEAVER COMMITTEE CERTIFICATION

I hereby certify that _____ (Beaver Trapper) trapped _____ (number) Beaver(s) on the above identified property of _____ (Landowner) and hereby approve payment for _____ sets of beaver ears at \$40 each to equal \$ _____ plus _____ tags returned at \$2 each for a deposit return of \$ _____. The total payment on this certification form is \$ _____ for the following tag numbers _____.

BEAVER PROGRAM REPRESENTATIVE

DATE

PAYMENT (Office use only)

I hereby certify that _____ (Beaver Trapper) is eligible to receive payment of \$ _____ for the above listed tag numbers.

DISTRICT REPRESENTATIVE

DATE

COLUMBUS COUNTY BEAVER MANAGEMENT PROGRAM BEAVER BOUNTY PROGRAM DAM REMOVAL CERTIFICATION FORM

LANDOWNER INFORMATION	DAM REMOVERS INFORMATION
NAME: _____	NAME: _____
ADDRESS: _____	ADDRESS: _____
CITY, STATE, ZIP: _____	CITY, STATE, ZIP: _____
PHONE: (HOME) _____	PHONE: (HOME) _____
(CELL) _____	(CELL) _____
PROPERTY ID NUMBER(S): _____	LICENSE NUMBER (if necessary): _____
DATE TRAPPING COMPLETED: _____	DATE OF DAM REMOVAL: _____

DISCLAIMER

I, _____ hereby assume full responsibility and liability for beaver dam removal on the above listed property and in no way do I hold Columbus County, its agencies or any committees appointed by Columbus County responsible for any disturbance associated with beaver dam removal. I also understand that the information provided on this public document may be subject to disclosure under the North Carolina Public Records Act.

CERTIFICATION

I hereby certify that _____ (Number) Beaver dam(s) have been removed from the property of _____

I understand that I will receive \$15 per hour and no more than \$60 per dam for hand removal of each dam.

I understand that any misrepresentation of these numbers will be considered fraud and; that landowners and/or dam removers making false statements of these numbers will be subject to criminal prosecution and will be banned from participation in the Columbus County Beaver Bounty Program.

TRAPPER SIGNATURE

DATE

SOIL AND WATER CERTIFICATION

I hereby certify that _____ (Dam Remover) removed _____ (number) Beaver dam(s) on the above identified property of _____ (Landowner) and hereby approve payment for _____ dams at \$15 per hour (not to exceed \$60 per dam).

The total payment on this certification form is \$ _____ for the removal of these dams.

SOIL AND WATER REPRESENTATIVE

DATE

PAYMENT (Office use only)

I hereby certify that _____ (Beaver Trapper) is eligible to receive payment of \$ _____ for the beaver dam removal on the above listed property.

DISTRICT OFFICE REPRESENTATIVE

DATE

**COLUMBUS COUNTY BEAVER
MANAGEMENT PROGRAM LANDOWNER
PERMISSION CARD**

This certifies that _____
Full Name
is authorized to enter upon the property of _____

Landowner
for the purpose of **BEAVER TRAPPING ONLY**.
Permission is valid for the dates _____ to _____

Date _____ Signature of landowner _____ Telephone # _____

**COLUMBUS COUNTY BEAVER
MANAGEMENT PROGRAM LANDOWNER
PERMISSION CARD**

This certifies that _____
Full Name
is authorized to enter upon the property of _____

Landowner
for the purpose of **BEAVER TRAPPING ONLY**.
Permission is valid for the dates _____ to _____

Date _____ Signature of landowner _____ Telephone # _____

**COLUMBUS COUNTY BEAVER
MANAGEMENT PROGRAM LANDOWNER
PERMISSION CARD**

This certifies that _____
Full Name
is authorized to enter upon the property of _____

Landowner
for the purpose of **BEAVER TRAPPING ONLY**.
Permission is valid for the dates _____ to _____

Date _____ Signature of landowner _____ Telephone # _____

**COLUMBUS COUNTY BEAVER
MANAGEMENT PROGRAM LANDOWNER
PERMISSION CARD**

This certifies that _____
Full Name
is authorized to enter upon the property of _____

Landowner
for the purpose of **BEAVER TRAPPING ONLY**.
Permission is valid for the dates _____ to _____

Date _____ Signature of landowner _____ Telephone # _____

**COLUMBUS COUNTY BEAVER
MANAGEMENT PROGRAM LANDOWNER
PERMISSION CARD**

This certifies that _____
Full Name
is authorized to enter upon the property of _____

Landowner
for the purpose of **BEAVER TRAPPING ONLY**.
Permission is valid for the dates _____ to _____

Date _____ Signature of landowner _____ Telephone # _____

**COLUMBUS COUNTY BEAVER
MANAGEMENT PROGRAM LANDOWNER
PERMISSION CARD**

This certifies that _____
Full Name
is authorized to enter upon the property of _____

Landowner
for the purpose of **BEAVER TRAPPING ONLY**.
Permission is valid for the dates _____ to _____

Date _____ Signature of landowner _____ Telephone # _____

**COLUMBUS COUNTY BEAVER
MANAGEMENT PROGRAM LANDOWNER
PERMISSION CARD**

This certifies that _____
Full Name
is authorized to enter upon the property of _____

Landowner
for the purpose of **BEAVER TRAPPING ONLY**.
Permission is valid for the dates _____ to _____

Date _____ Signature of landowner _____ Telephone # _____

**COLUMBUS COUNTY BEAVER
MANAGEMENT PROGRAM LANDOWNER
PERMISSION CARD**

This certifies that _____
Full Name
is authorized to enter upon the property of _____

Landowner
for the purpose of **BEAVER TRAPPING ONLY**.
Permission is valid for the dates _____ to _____

Date _____ Signature of landowner _____ Telephone # _____