

**Trapper Beaver Control Agreement**

Adopted by Council – July 14, 2021 Resolution No. 21.479

I, \_\_\_\_\_, as a registered trapper, agree to undertake trapping activities under the direction of the Municipal District of Bonnyville (M.D.) Agricultural Service Board (ASB) adhering to the following conditions:

- (1) I will follow the trapping regulations set out by the provincial government and abide by the Code for Responsible Trapping set out in the trapping regulations.
- (2) I will use certified traps that may be inspected by ASB staff.
- (3) I will be responsible for supplying my own traps and the M.D. will not be responsible for any lost or stolen traps.
- (4) The M.D. will not be held liable for any injuries or accidents that occur during the trapping activities.
- (5) I will obtain written permission from the landowner(s) where the trapping is to be conducted and obtain the proper permits from the Alberta Fish & Wildlife office.
- (6) The M.D. will do a site visit with me to determine the approximate number of beavers to be removed and the value of monetary compensation.
- (7) I will complete a Work Site Hazard Assessment for each location where trapping is to occur.
- (8) I may salvage the hide from the trapped beavers and sell them to an approved fur buyer to my credit.
- (9) I will notify the M.D. after the trapping has been completed so a post-trapping inspection can be completed to verify that the work has been completed to the satisfaction of the M.D.
- (10) Compensation will be paid, as agreed, upon satisfactory completion of the trapping activity in accordance with the M.D.'s semi-annual payment schedule.

Locations to be trapped:

Quarter \_\_\_\_\_ Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_ W4M

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Quarter \_\_\_\_\_ Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_ W4M



# Beaver Control Policy: ATTACHMENT B

5A.003

Trappers Licence Number: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Email: \_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 202\_\_\_\_ at \_\_\_\_\_, in the Province of Alberta.

\_\_\_\_\_  
Trapper (Print)

\_\_\_\_\_  
M.D. Representative (Print)

\_\_\_\_\_  
Trapper (Signature)

\_\_\_\_\_  
M.D. Representative (Signature)

The collection of personal information on this document is governed by the Freedom of Information and Protection of Privacy (FOIP) Act as well as other provincial enactments. The M.D. has legal authority to collect information to assist in the operations of municipal programs and services. Should you have any questions or concerns regarding the content of this document, please feel free to contact our *FOIP Coordinator at the M.D. of Bonnyville, 4905 – 50 Avenue Bonnyville, AB T9N 2J7 P: 780-826-3171 F: 780-826-4524.*