



**REQUEST TO CANCEL ASSISTANT TRAPPER LICENCE –
CONCESSION HELD AS A GROUP**

To: Yukon Department of Environment

I, _____ the spokesperson for _____ trapping group,
holders of the trapping concession for trapping concession area # _____, request the cancellation of
an assistant trapper licence issued to _____ for our trapping concession area.

By signing below as the trapping group spokesperson, I declare that all group members are in support of this request.

Sincerely,

Group trapping concession spokesperson

Date YYYY/MM/DD

Witness

Date YYYY/MM/DD

Your personal information is being collected under the authority of section 29(c) of the *Access to Information and Protection of Privacy Act* and will be used for the administration and enforcement of the *Wildlife Act* and Regulations, for evaluation, research, statistical, and land management purposes. For further information on the collection of your information, contact the ATIPP Coordinator, Yukon Department of Environment, Box 2703, Whitehorse, Yukon, Y1A 2C6, (867) 667-5652 or 1-800-661-0408 ext. 5652 within Yukon.