THE NORTHERN TERRITORY OF AUSTRALIA – FISHERIES ACT

AQUARIUM TRADER

LICENCE NO: **D3/**_____ LICENCE HOLDER NAME (operator's name): _____

MONTH: _____ YEAR: _____ **NIL RETURN** (tick, if appropriate)**:** ☐

Species Purchased		Quantity	Maturity	Licence Number or Trading Name of Supplier	Code	Purchase Value ($)
Species Name	**Common Name**					

I _____**declare that the information on this return is true and accurate.**
(print operator's name)

SIGNATURE OF LICENCE HOLDER: _____ **DATE:** ____/____/____
(operator's signature)

official use only

NORTHERN TERRITORY GOVERNMENT