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|  | | Melding bestrijding Rosse stekelstaart | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  | | ////////////////////////////////////////////////////////////////////////////////////////////////////////////////////////////// | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Agentschap%20Natuur%20en%20Bos  Havenlaan 88 bus 75 1000 Brussel Antwerpen, Limburg en Vlaams-BrabantT 1700 - [jacht.oost.anb@vlaanderen.be](mailto:jacht.oost.anb@vlaanderen.be)Oost- en West-Vlaanderen **T** 1700 - [jacht.west.anb@vlaanderen.be](mailto:jacht.west.anb@vlaanderen.be) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | *In te vullen door de behandelende afdeling* | | | | | | | | | |
| ontvangstdatum | | | | | | |  | invoerdatum | |
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|  | | ****Waarvoor dient dit formulier?****  Met dit formulier meldt u aan het Agentschap voor Natuur en Bos het doden van een Rosse stekelstaart. Dit formulier is een toepassing van artikel 31/8 van het Soortenbesluit van 15 mei 2009. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | Gegevens van de melder | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1 | | Vul uw persoonlijke gegevens in.  Uw geboortedatum hoeft u alleen in te vullen als u niet over een rijksregisternummer beschikt. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | rijksregisternummer | |  | |  | |  | | | |  | | | |  | |  | | - | | | |  | | | |  | | |  | | . | | |  | | | | |  | | | | |  | | | | | | | | | | | | | |
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| 2 | | **Vul de gegevens van de schutter in.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 3 | | **Vul de gegevens van de begeleider in.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | voornaam | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | achternaam | | | | | | | | | | | | | | | | |  | | | | | | |
|  | | telefoon of gsm | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 4 | | | **Vul de waarnemingen in.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | Mannetjes | |  | | |  | |  | | | | | | | | | | | | | | | | | | | | | | | |
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|  | Gebruikte methode(s) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5 | **Met welke methode is de bestrijding uitgevoerd?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | Afschot | |  | | | Eieren neutraliseren | | | | | | |  | | Lokken met geluid | | | | | |  | | Boot gebruikt | | | | | |  |  | | | |
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|  | | | Gebruikte munitie | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6 | | | **Vul de gebruikte munitie in.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | Aantal gedode specimens | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7 | | | **Vul het aantal gedode specimens in.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 8 | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | Ondertekening | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 9 | | **Vul de onderstaande verklaring in.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | **Ik verklaar dat alle gegevens in dit formulier naar waarheid zijn ingevuld.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | handtekening | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
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|  | | | Aan wie bezorgt u dit formulier? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 11 | | | *Mail de ingevulde of ingescande versie van dit formulier binnen een maand* ***nadat het dier gedood werd****, voor de provincies Antwerpen, Limburg en Vlaams-Brabant naar* [*jacht.oost.anb@vlaanderen.be*](mailto:jacht.oost.anb@vlaanderen.be) *en voor de provincies Oost- en West-Vlaanderen naar* [*jacht.west.anb@vlaanderen.be*](mailto:jacht.west.anb@vlaanderen.be)*.*  *Verzendt u liever per post? Dat kan via een aangetekende zending binnen een maand* ***nadat het dier gedood werd****, die niet geplooid of geniet is, naar Agentschap voor Natuur en Bos, Havenlaan 88 bus 75, 1000 Brussel.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |