

APPLICATION FOR MEXICAN WOLF INDIRECT DAMAGES TO LIVESTOCK

Mail completed applications to:

County Livestock Loss Authority

Deborah Mahler
CLLA Administrator
P.O. Box 507
Reserve, NM 87830

You may also scan and email a completed application to deborah.mahler@catroncountynm.org

This is the correct application form to submit for losses you incurred between January 1, 2024 through December 31, 2024 due to the presence of Mexican Wolves near your cattle operations in New Mexico. This form covers losses from decreased conception rates, decreased weaning weights of calves and decreased weights of yearlings due to the presence of Mexican Wolves.

- Applications will be funded based on a payment formula and the amount of funding available. Applications are due by **May 31, 2026**.
- Successful applicants will be required to submit additional information for tax purposes.

Please note this is NOT the correct application form for individual depredations or for conflict avoidance practices implemented to avoid or reduce interactions between wolves and livestock. Forms for individual depredations and conflict avoidance are available on the County Livestock Loss Authority website at <https://cllanm.org>

*For more information on this form or the County Livestock Loss Authority, please contact Deborah Mahler, CLLA Administrator at 505-787-9652

Section I. General Information

Calendar Year of Funding Request: 2024

Date of Application:

Section II. Contact Information

1. Name(s) of Applicant(s):

2. Address:

City:

State:

Zip:

3. Phone Number:

4. Cell Phone Number:

5. Email Address:

Section III. Ranch Information

6. Name of Ranch Property:

7. Name of Federal Grazing Allotment if any?

8. Number of breeding cows and heifers on Ranch in 2024 (No Bulls)

9. Number of yearlings on Ranch in 2024:

10. Estimate of Confirmed or Probable (as determined by USDA-APHIS Wildlife Service Investigators) Wolf-Caused Livestock Kills on the Ranch during the Calendar Year 2024:

Section IV. Conflict Avoidance Information

Note: Conflict avoidance measures include any ranching techniques that were implemented to reduce the impact of wolves that differ from normal operations.

11. What were the Conflict Avoidance Measures used on the Ranch

Indicate all that apply.

- **Pasture Rotation:**
- **Range Riding:**
- **Adjusted Breeding Season:**
- **Fladry:**
- **Livestock Protection Dogs:**
- **Other (identify):**

12. What was the Estimated Cost to the Ranch from Implementing Conflict Avoidance Measures?

Section V. Wolf Information

13. Were Collared Wolves Present on the Ranch during the Calendar Year 2024:

14. What was the Name of the Pack that was Present on the Ranch during the Calendar Year 2024: (if known/otherwise leave blank)?

15. Were Uncollared Wolves (not associated with collared animals) Present on the Ranch during the Calendar Year 2024:

16. How Frequently Did Ranch Employees Observe Sign (scat, tracks, or hear howling) of Wolves?

17. How Frequently Did Ranch Employees See Wolves?

18. What was the Greatest Number of Wolves Seen Traveling Together by a Ranch Employee in a Single Observation? (if known/otherwise leave blank)

Section VI. Board Liability and Release

Acceptance of funding constitutes a full and complete release of all claims the applicant, his/her successors, and/or assigns may have against the County Livestock Loss Authority, its member Counties, their officers, employees, agents, and contractors, related to the implementation of the Mexican Grey Wolf Recovery Program. Claimant acknowledges that they may be responsible for state and/or federal income tax for payment(s) received in conjunction with this Program.

Section VII. Disclosure and Confidentiality

I understand that any information provided to the County Livestock Loss Authority in relation to this application is subject to disclosure under the New Mexico Inspection of Public Records Act, except as otherwise expressly provided therein. By submitting this application, I knowingly waive any right to confidentiality in relation to the material submitted in conjunction with this application, subject to the exceptions referenced above.

Section VIII. Declaration

I swear and affirm that the information provided in this application and any additional information that may be provided to the County Livestock Loss Authority in relation to this application is true and accurate to the best of my knowledge.

Applicant Signature: _____ Date: _____

Printed Signatory Name: _____

Section VIII. For Official Use Only

For Official Use only:

Number of Core Areas that Overlap with The Ranch: _____

Number of Territories that Overlap with The Ranch: _____

Number of Pups that survived until December 31 in Territories That Overlap with The Ranch: _____

What Conflict Avoidance Measures Were Implemented? _____

Number of Cows and Heifers on ranch Exposed to Wolves: _____

Number of yearlings on ranch exposed to
wolves: _____

Were Cattle Depredated on Ranch: _____

Total Points for Application: _____

Percentage of All Points (For All Ranchers): _____

Payment Amount Authorized: \$ _____

Printed Name of CLLA Reviewer: _____

Signature of Reviewing Official From CLLA: _____