



**Open Gate Program**  
Assignment of Authorized Ranch Contact Form



**GMU:** \_\_\_\_\_

**Ranch Name:** \_\_\_\_\_

The **Authorized Ranch Contact** is the person designated in writing by the landowner(s) to act as the liaison between the ranch and the Department for specific activities associated with the Open Gate program as subscribed below. By initialing delegated responsibilities below, he or she will become responsible for acting in the landowner(s) best interest in the Open Gate program. The Authorized Ranch Contact may be one of the owners or someone else designated by the owners.

All persons listed on the recorded deed(s) (other than a spouse) must complete this form and designate the same individual as the Authorized Ranch Contact. Each person must sign and submit a separate form. All signatures must be notarized. Please make copies of the form as needed.

**I hereby designate the individual below as the Authorized Ranch Contact (Initial only those that apply):**

\_\_\_\_\_ To act as the individual to negotiate and sign Open Gate Contracts.  
Initials

\_\_\_\_\_ To receive payments due as a result of the Open Gate Contract.  
Initials

\_\_\_\_\_ To act as the day-to-day contact with New Mexico Game and Fish for the property.  
Initials

\_\_\_\_\_  
*Please print name of Authorized Ranch Contact*

\_\_\_\_\_  
Mailing Address, City, State and Zip Code of authorized ranch contact

\_\_\_\_\_  
Phone Number of authorized ranch contact

\_\_\_\_\_  
E-mail address

**Landowner check the appropriate box and sign below:**

I am the **sole owner** (other than a spouse) of this property. I am assigning the person above as the Authorized Ranch Contact.

I am **one of the owners** of this property. I am assigning myself or the person above as the Authorized Ranch Contact.

I am the representative for the **trust or business entity** that owns this property. I am assigning myself or the person above as the Authorized Ranch Contact.

I have read the Open Gate contract and understand my legal responsibilities and obligations for participation and agree to participate in the program.

I attest that I understand the definition for 'Authorized Ranch Contact', as defined above, and agree that the individual I have designated as the Authorized Ranch Contact may act on my behalf for the activities initialed above until I rescind their authority by contacting the Department of Game and Fish.

I understand that the activities not initialed above will continue to be under my authority and fully my responsibility.

Pursuant to 19.34.7.10(E), other applicable law, and by acknowledgment in submitting this form, if any landowner and/or Authorized Ranch Contact misrepresents or permits the false representation of the property's ownership, deeded acreage or other material attributes, or breaches or fails to comply with the conditions of any Open Gate Agreement, the Agreement will be rendered invalid.

County of \_\_\_\_\_, State of \_\_\_\_\_

Subscribed and sworn to before me in my presence,  
this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Signature of Notary \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

X \_\_\_\_\_  
Signature of Owner

Date \_\_\_\_\_

Printed Name \_\_\_\_\_