

| MAR1503C.indd/REV. 4/22 | | | | | |
|-------------------------|--|--|--|--|--|
| FOR OFFICE USE ONLY | | | | | |
| License # | | | | | |
| Date Issued | | | | | |
| | | | | | |

APPLICATION FOR LOBSTER AND CRAB LICENSE AND LOBSTER HELPER'S LICENSE

(RSA 211:18, RSA 211:20, Fis 1105.03, 1110.09)

Each Year Applicants <u>MUST</u>: Complete an application, and provide a copy of their <u>driver's license</u> and <u>boat</u> registration. *All Licensees are required to report their catch and effort data on a monthly basis.*

| <u>registration</u> . All Lice | nsees are required to r | report their c | atcn and effort | aata on a <u>mont</u> | <u>niy</u> dasis. | | |
|--|---|----------------------|--|--|---|--|--|
| | Will you be selling (reta | il) your own cat | tch? 🔲 Yes 🔲 N | lo | | | |
| Part-time Comn Limited Comme Commercial Lic Lobster Helpers *Prior app | License roval from Marine Division Requ | ☐ \$15.00 D | • • • | | obsterLic.#) | | |
| PLEASE TYPE OR PRINT CLEARL Legal Name of Applicant: | Y - Must be completed in tul | <i>II.</i> | | | | | |
| LAST NAME (plus suffix) | FIRST NAME | MI | | MAIDEN NAME (if applies) | | | |
| STREET ADDRESS | ADDRESS | | | | () HOME OR PERSONAL CELL PHONE NUMBER | | |
| CITY | STATE | | ZIP CODE COUNTRY | | | | |
| MAILING ADDRESS (IF DIFFERENT FROM ABOVE): | | | EMAIL ADDF | RESS | | | |
| CITY | STATE | | ZIP CODE COUNTRY | | | | |
| Date of Birth: | | | Weight: | Eye: | Hair: | | |
| MONTH/DAY/ | | RMATION IS REQ | N JIRED | | | | |
| Vessel/Boat Information: Vessel Owner (if not same as above): | sel/Boat Information: State of Registration | | | Color Marking of Buoys and on Boat: Indicate color markings on buoy illustration at right. | | | |
| LAST NAME (plus suffix) | FIRST NAME N | ИІ | Spindle Colors: | | | | |
| STREET ADDRESS OF OWNER | | | Barrel Colors: | | ─ | | |
| CITY STATE | ZIP CODE | COUNTRY | | | | | |
| VESSEL NAME | STATE REGISTRATION # OR COAST GUARD # | | Vessel Length: | | Built: | | |
| NATIONAL MARINE FISHERIES FEDERAL PERMIT# | PRINCIPAL PORT | | Net Tons****: | | epower****: | | |
| HULL ID # | HULL CONSTRUCTION MATERIAL | | Hold Capacity (in Tons)****: ""Complete for Federal documented vessels only. | | | | |
| RESIDENT AFFIDAVIT: I hereby certify that I am a resident of the State I hereby certify that the above information is true NONRESIDENT AFFIDAVIT: I hereby certify that the above information is | and correct. (Licensee subject to the | penalties for makin | ng unsworn false statem | ients under RSA 641:3). | | | |
| Sportsperson statement: I certify that my privil any state or province (RSA 214:18b) and furthed angerous weapon. | eges to fish, guide, take or land lobst | ers, or engage in co | mmercial marine fishing | activities are not under su | spension or revocation in | | |
| APPLICANT'S SIGNATURE | PLICANT'S SIGNATURE APPLICANT'S NAME (PLEASE PRINT) | | | | | | |

LICENSE EXPIRES DECEMBER 31, _____.