

2024 Commercial Menhaden License Application

Part A: Applicant Information

Last Name _____ Suffix _____ First Name _____ MI _____
Social Security # _____ Gender: Male-Female-Non-Binary (circle one) DOB _____
Eye Color: _____ Hair Color: _____ Height: _____ Weight: _____ Driver's License _____
If no DL – list reason: _____ Mailing Address: _____
City: _____ State: _____ Zip Code: _____
Physical address: _____ Zip Code: _____
Email _____ Landline # _____ Mobile # _____
Must list at least one phone number

Part B: Fishery Information

License year Jan. 1, 2024 to Dec. 31, 2024

Menhaden License^{LM}
(COMMERCIAL LICENSE IS LIMITED ENTRY AND YOU MUST HAVE
QUALIFIED IN 2023 IN ORDER TO OBTAIN THIS LICENSE)

Commercial^{LM} \$328

Nonresident^{LM} \$900

M – Mandatory reporting.
L – Limited Entry license with previous catch history used to determine
eligibility

Part C: Supplemental Information

Fill out all information completely. False statements or
misrepresentations will result in the revocation of the license and
prosecution in Court.

Boat Reg/Doc # _____

Boat Name _____

Boat Length _____

Town of Primary Anchorage _____

Part D: Certification / Signature

I hereby declare, under the penalty of perjury under the laws of the State of
Maine and the United States of America that the foregoing information is true and
correct and, if applying for a resident license, that I have read and understood the
residency requirements listed on the back of this form and meet those requirements.

Did you fish recreationally in tidal waters of the State of Maine last year?

Yes No

Today's Date ____ / ____ / ____

Month Day Year

Applicant _____

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SIGNATURE REQUIRED

Print Name _____

Parent or

Guardian _____

(Applicants under 18 must have a parent or legal guardian who also meets the residency requirements
sign this form.)

Under Title 12, §6306, (1)(2) and (3), a person licensed by the Department
of Marine Resources has a duty to submit to inspection, search and seizure
by a Marine Patrol Officer. Failure to comply with this duty may result in
a license suspension. For the full text of this law – see Title 12, Section
6306.

Instructions:

Complete the information in **Part A** on the front of this form. Check the license(s) requested in **Part B** and calculate the total fees. Fill out all applicable information in **Part C**. Read the **residency requirements** included on this document and **certify your application with your signature in Part D**. Send application and/or check made payable to **Treasurer, State of Maine** or fill out the section below for **credit card payments, We cannot accept applications by fax or phone.** If you have questions call (207) 624-6550, Option 2.

Mail to:
Licensing Division
Department of Marine Resources
21 State House Station
Augusta, ME 04333

***Residency Requirements:** Any individual who has been domiciled in Maine for the past 6 months preceding the date of application is eligible for a resident license. A corporation is eligible for a resident license if it has been created and exists under the laws of Maine and it has existed in Maine for 6 months preceding the date of application. A firm or partnership is eligible if all of its officers or partners have been domiciled in Maine for 6 months preceding the date of application. For the purposes of this license application, a resident is a person who:

- A. If registered to vote, is registered in Maine;
- B. If licensed to drive a motor vehicle, has made application for a Maine motor vehicle operator's license;
- C. If the owner of one or more motor vehicles located within the State, has registered at least one of the motor vehicles in Maine; and
- D. If required to file a Maine income tax return on the previous April 15th, filed a Maine income tax return.

SAVE TIME AND RENEW ONLINE.

<https://maine-dmr-leeds-prod.pegacloud.com/>

PAYMENT INFORMATION:

Please make all checks/money orders payable to: **Treasurer State of Maine** **We cannot split payments on license fees.**

Your check will be processed as an electronic funds transfer (EFT).

Please check this box if your bank does NOT accept EFT transactions so we can manually submit your check to the bank for processing. Please be aware that if an EFT transaction gets rejected by your bank, you will be responsible for the payment as well as a \$20.00 bank fee.

Credit/debit card payments: I authorize the State of Maine, Department of Marine Resources, Licensing Division, to charge my
VISA MasterCard Discover Debit card

First Name _____ Last Name _____
MUST BE AS IT APPEARS ON CARD – PLEASE PRINT LEGIBLY AS THIS MAY AFFECT PROCESSING OF APPLICATION

Card No. _____ CVV# _____ expiration date _____

Signature of Cardholder: _____ Date: _____

Your credit card or checking account will be charged for what you have applied for on this application