TRAP TAG REPLACEMENT CERTIFICATION

Mail-in ordering: DEPARTMENT OF MARINE RESOURCES

21 STATE HOUSE STATION AUGUSTA ME 04333-0021 ATTN: LICENSING 624-6550

FAX# 207-624-6024

THIS SECTION $\underline{\text{MUST}}$ BE COMPLETED TO ORDER OR RECEIVE TAGS:

Name:	Date of Birth				
Address		, City	, Sta	ite 2	Zip
Trap Tag Year	Lobster / Crab licen	Today's Date			
PAYMENT MA	Y BE MADE BY CREDI	T OR DEBIT C	ARD, CHECK OR	MONEY	ORDER ONLY
REQUIRED (CENSE HOLDERS ON QUESTIONS: F F Geep in mind you can o	IOW MANY REASON FOR	R LOSS?		
	Replacement or E				
	Replacement □ or E @75¢=\$				
oc replaced	W/3¢- \$	π δ	188ucu		
2 nd Zone Tag Regula replaced	r Replacements . The co @ 20¢ = \$	ost will be 20 c	ents each. Numb	er of 2 nd z	zone tags to be
*******	*********	******	******	*****	*******
NONCOMMERCIA	L LICENSE HOLDEF	RS ONLY:			
Number of Noncommercial replacement tags @ .75 cents each= \$ Total.					Total. No
more than 2 replacen	nent tags may be issued ou must request a catast	d to noncomm	ercial license hol	lders. If r	requesting more than
********	*********	******	******	******	*******
The statements made my knowledge and be	by me in this trap tag elief, and are subject to	Replacement verification	Exchange Certi	fication a	are true to the best of
	nature				
Credit □ / Debit □	Card Payment: I au	thorize the St	ate of Maine, Dep		
	charge my VISA□ M				
In the Amount of \$, expiration o	late	CVV#		
	older (name must be <u>ex</u>				

Checks should be made payable to Maine State Treasurer