

# Marine Resources ELVER Dealer & Supplemental 2021

Please provide all information requested. Incomplete applications will be returned for correction.



## Part A: Applicant Information

Landings # \_\_\_\_\_

Business Name: \_\_\_\_\_

Fed Employer ID#: \_\_\_\_\_

Contact Person: \_\_\_\_\_

If a corporate entity, please fill out the primary ownership in Part E on the back of this Application

Mailing Address of Business: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_

Elver Dealer's license authorizes the licensed activities at only **ONE** permanent facility.

\*Permanent Facility Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Landline: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

E-mail: \_\_\_\_\_

Check box if the permanent facility listed to buy elvers has been inspected before.

## Part B: License Fees THE LICENSES BELOW

**MUST BE POST MARKED BY FEBRUARY 1<sup>ST</sup>, 2021 TO BE ACCEPTED THROUGH THE MAIL**

LICENSE FEES ARE NOT REFUNDABLE.

	Renew	New	Fees
Elver <sup>M</sup>	<input type="checkbox"/>	<input type="checkbox"/>	\$1213
	Owned	Leased*	Rented*
Facility location is (check one)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Elver Supplemental <sup>EM</sup>	<input type="checkbox"/>	<input type="checkbox"/>	\$ 63

1. Do you buy, or intend to buy, from harvesters (fishermen)?<sup>M</sup>  
Yes  No

If yes, your license will reflect a primary buyer permit, allowing you to buy directly from harvesters. Reporting required.

\*Must provide a lease or rental agreement if permanent facility location is NOT owned.

Elver Supplemental information is required under Part C.

### Notes:

**E** – Submit separate applications for each additional supplemental license. An additional supplemental license is required for each additional holding facility and/or vehicle being licensed. A **supplemental license must be obtained for each vehicle and permanent facility. There is no mobile buying from a vehicle or from a facility that is listed on a supplemental license.**

**M** – Mandatory reporting with primary buyer permit. First time applicants must contact DMR Landings Program at (207) 633-9500 for reporting requirements.

\*Permanent Facility means a permanent building that is owned or legally leased by the license holder and is not a dwelling, and is located in Maine.

Any "New" permanent facility locations that are listed must be inspected and approved by Marine Patrol before issuance of license.

## Part C: Supplemental Information

Please complete if licensing a vehicle:

Is this vehicle owned \_\_\_\_\_ leased \_\_\_\_\_ rented \_\_\_\_\_?

If leased or rented send a copy of the lease or rental agreement.

Registration # \_\_\_\_\_ Make \_\_\_\_\_

Vehicle ID No. \_\_\_\_\_

Model \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_

Please complete if licensing additional supplemental facilities: (If different from mailing address)

Street \_\_\_\_\_

Town \_\_\_\_\_

**CANNOT OBTAIN ADDITIONAL LICENSES OR SUPPLEMENTALS AFTER FEBRUARY 1<sup>ST</sup>.**

## Part D: Certification

I hereby declare that the foregoing information is true and correct. **Making any false statement on this license application is punishable under Title 17-A MRS section 453.**

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

(Owner or an Authorized Official of the Firm) (Month/Day/Year)

Please Print Name \_\_\_\_\_

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.

### §6306. Consent to inspection

1. **Consent to inspection.** Any person who signs an application for a license or aquaculture lease or receives a license or aquaculture lease under this Part has a duty to submit to inspection and search for violations related to the licensed activities by a marine patrol officer under the following conditions.

A. Watercraft or vehicles and the equipment located on watercraft or vehicles used primarily in a trade or business requiring a license or aquaculture lease under this Part may be searched or inspected at any time.

B. Any other location where activities subject to this Part are conducted may be inspected or searched during the hours when those activities occur.

C. A location specified in paragraph B may be inspected at any time if a marine patrol officer has a reasonable suspicion of a violation of this Part.

D. No residential dwelling may be searched without a search warrant unless otherwise allowed by law.

2. **Seizure of evidence.** Any person who signs an application for a license or aquaculture lease or receives a license or aquaculture lease under this Part has a duty to permit seizure of evidence of a violation of marine resources laws found during an inspection or search.

3. **Refusal.** Refusal to permit inspection or seizure is a basis for suspension of any or all licenses under this chapter or revocation of aquaculture leases.

**Part E: Primary owner information required.**

**For Corporations with six or fewer shareholders, please fill out the highest percentage. Please print legibly.**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ DOB \_\_\_\_\_ SS# \_\_\_\_\_ % \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ DOB \_\_\_\_\_ SS# \_\_\_\_\_ % \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ DOB \_\_\_\_\_ SS# \_\_\_\_\_ % \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ DOB \_\_\_\_\_ SS# \_\_\_\_\_ % \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ DOB \_\_\_\_\_ SS# \_\_\_\_\_ % \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ DOB \_\_\_\_\_ SS# \_\_\_\_\_ % \_\_\_\_\_

**For Corporations with greater than six shareholders, please identify Agent's name that is listed on your corporation documents.**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_, Address \_\_\_\_\_

City \_\_\_\_\_, State \_\_\_\_\_, Zip: \_\_\_\_\_ Phone # \_\_\_\_\_

**INSTRUCTIONS:**

Complete the information in **Part A** on the front of this form. Check license(s) requested in **Part B** and calculate the total fees. Fill out all applicable information in Part C. **Certify your application with your signature in Part D.** Enclose this document in an envelope along with a check or money order payable to **Treasurer, State of Maine** or fill out the section below for credit card payments, affix a stamp and put it in the mail. **We cannot accept applications by fax or phone.** If you have questions, call (207) 624-6550.

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

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

**Please make all checks/money orders payable to: Treasurer State of Maine**

**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

***Check us out online at: MAINE.GOV/DMR***