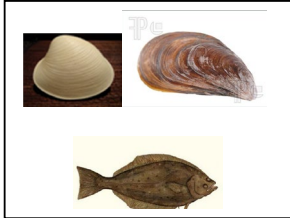


Marine Harvesting 2023

Commercial Harvesting Application

This form may be used to apply for or renew licenses. Please provide all information requested. Delays may result from incomplete applications.

**LICENSE FEES ARE
NONREFUNDABLE**



Landings# _____

Part A: Applicant Information

Last Name : _____ First Name _____
Social Security # _____ Sex _____ DOB _____
Eye Color _____ Hair Color _____ Height _____
Weight _____ Driver's License # _____
If no driver's license - reason _____ if under 18 parent lic# _____
Resident Licenses cannot have a driver's license issued by another state.
Mailing Address: _____
City: _____ State: _____ Zip Code: _____
Physical Address: _____ Zip Code: _____
(IF DIFFERENT THAN MAILING)
Email _____
Landline# _____ Mobile# _____
Must list at least one phone number

Part B: Fishery Information

License year Jan. 1, 2023 to Dec. 31, 2023

Commercial Fishing

Single ☐ \$48 Crew ☐ \$128 Nonresident ☐ \$481

Commercial Fishing Applicants Only:

Whelk Permit Yes ☐ No ☐
Periwinkle Yes ☐ No ☐
Dragged Crab (otter trawl only) Yes ☐ No ☐

Non Resident Commercial Fishing Special

Tuna Permit (Tournaments Only) ^C ☐ \$84

Commercial Pelagic Fishing ^{AM}

Single ☐ \$98 Crew ☐ \$328 Nonresident ☐ \$900

Herring Permit ^M Yes ☐ No ☐
Whiting Permit ^{M I} Yes ☐ No ☐

**Carrier License (list boat) ☐ \$98

**Before purchasing a carrier license, please confirm that carriers are allowed in the fishery you intend to use the license

Eel (not for Elvers) ^M ☐ \$125

*Mussel ^M Dragger ☐ \$265 Hand ☐ \$133

Quahog (Mahogany) ☐ \$128

*Surf Clam Boat ☐ \$265

*Scallop Spat ☐ \$75

Seaweed ^M Resident Nonresident
Primary ☐ \$58 ☐ \$230
Supplemental ☐ \$29 ☐ \$58

If supplemental seaweed, please list name of primary license holder.

Notes:

A- Includes research surcharge.

I - Whiting permit may be obtained only by Federal permit holders. Fishing nets must be inspected before obtaining permit. Call Marine Patrol at (207) 633-9595 or 664-2392 for an appointment.

M - Mandatory reporting. First time applicants must contact DMR Landings Program at (207) 624-6550, Option 1 for reporting requirements

C- Fee may be credited towards nonresident commercial fishing license within 30 days of issuance. This permit is for tuna tournament.

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 # _____ 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 _____

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) and permits 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.

Obtain your license online by using our online system-LEEDS. See link below.

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

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.

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