

North Carolina Department of Environmental Quality Division of Marine Fisheries FISH DEALER APPLICATION INSTRUCTIONS (REV 2023-12)

This application is to be completed and signed by individuals applying for a Fish Dealer license. Businesses requesting a license must have the Responsible Party (business agent) complete and sign the application. The Responsible Party is the person who coordinates, supervises, or otherwise directs operations of a business entity, such as a corporate officer or executive-level supervisor of business operations and is the person responsible for use of the issued license in compliance with applicable laws and regulations. Individuals applying for a license for another under the authority of Power of Attorney must submit a **PHOTOCOPY** of the Power of Attorney and current picture identification.

Provide a **PHOTOCOPY** of one of the following current picture identifications:

- Driver's License; or
- State Identification (issued by DMV); or
- Military Identification; or

- · Passport; or
- Resident Alien Card (green card)

If you are applying as a business, you <u>must</u> provide:

- If incorporated, a **PHOTOCOPY** of Articles of Incorporation and list of current corporate holders.
- If organization, a **PHOTOCOPY** of the Articles of Organization and list of current corporate holders.
- If written agreement partnership, a **PHOTOCOPY** of written partnership agreement.
- If <u>not</u> incorporated, an organization, or written partnership, a **PHOTOCOPY** of current Assumed Name Statements, filed with Clerk of Court in the business county, and a **PHOTOCOPY** of business privilege tax certificates, if applicable.
- Current annual reports for LLC or INC.

A Fish Dealer Application:

- Sign and date the Application.
- Complete the NC DMF License Certification Statement Form. Form must be notarized if applying for a new license.
- If purchasing a Fish Dealer License with CLAM or OYSTER categories or a CONSOLIDATED license, you must provide a **PHOTOCOPY** of a valid (not expired) certification from the Department of Environmental Quality Division of Marine Fisheries. For information on certification, contact the North Carolina Shellfish Sanitation Section at 252-515-5500.
- The Applicant will be required to report all landings from fishermen on trip tickets at the time and point of landing.
 Trip tickets must be filed with the Division of Marine Fisheries by the 10th of the following month.
- The Applicant must comply with all requests from the Division of Marine Fisheries for all data collection inquiries.

Fees:

- See Commercial License and Permit Fee Sheet. If you need assistance, please contact any NC DMF License
 Office or call (252) 515-5500 or (800) 682-2632. Replacement Fee: There is a \$10.00 fee for replacing current/valid
 license.
- Method of payment: Personal check, Money Order, Cashier check, or Credit Card (In person only). Make payable to North Carolina Division of Marine Fisheries. There will be a \$25.00 service charge for returned checks.

You are required to notify the Division of Marine Fisheries of any address or residency changes within 30 days. Incomplete applications submitted without required documentation will be deemed incomplete and returned to you unprocessed.

Mail to: North Carolina Division of Marine Fisheries

License Office PO Box 769

Morehead City, NC 28557



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Select One:	□ New A _l	pplicatio	n □ Renew	□ Re	place □	Update			
Existing Fish (This number is Dealer License	printed on the	license to	n ber o the right of the words <i>Fisi</i>	h					
	□ Individua		ioinont Information		□ Bu	siness Agent			
Participant I.I	Business Ag).	gent Participant Information First Name Middle Name			Last Name Suffix				
Participant I.[D.	Business Name:			State of Inc	State of Incorporation: Charter State:			
Business Ow	ner Name (F,	M, L)	M, L) Business Owner/Agent Name (F, M, L)			Business C	Business Owner/Agent Name (F, M, L)		
Check One: Driver's License		State I.D	D. Military I.D. D			Resident Alien I.D. Passport			
No.			Expire [Date	1	1			
Date of Birth		Primary Residence (State)				E-mail Address			
/	_/								
Race Gender: Ph			Physical Address			Mailing Address			l
	M/F								
Height					Address 1:				
		Address 2				Address 2:			
Address 2:				Address 2.					
Eye Color	Hair Color	City: State: Zip:			City:	State	: Zip:		
County: Country:				County:		Country:			
Homo Dhono	Home Dhanes Dhanes Dhanes Town					Cellular Phone:			
Home Phone:			Business Phone: Fax:				Celiulai	FIIUIR.	
					-				

North Carolina Division of Marine Fisheries • 3441 Arendell ST • PO Box 769 • Morehead City, NC 28557 (252) 515-5500 • Manteo: (252) 473-5734 • Washington: (252) 948-3800 • Wilmington: (910) 796-7215

Partnership

Sole Proprietorship

LLC

Corporation

Type of Business Entity (Circle One):



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Dealer Location (Physical address and location where fishermen will be transferring catch to the dealer)

v <u>iust be pi</u>	nysically lo	cated in No	rth Carolin	a.					
Address	Line 1:								
Address	Line 2:								
City:			State:		Zip:		Country:		
Business	Business Location Phone No. (()	Business Fax Phone N). ()		
	Records location (Physical address where records, including trip tickets, are kept)) Check if same as physical address Address Line 1:								
Address	Line 2:								
City:			State:		Zip:		Country:		
Phone No:	()		- 1	Fax No:	()				
		dress whe	re trip ticke	et supplies	are to be	shipped) 🗌 Check i	if same as phys	sical add	Iress
Address	Line 1:								
Address	Line 2:								
City:			State:		Zip:		Country:		
Phone	()			Fax No:	()				



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Ca	tegories (must indicate which categories you will be dealing in) – Check ALL that apply:
	New Dealer
	Consolidated License (all categories) (Requires Shellfish Certification <u>prior</u> to the purchase of this license. Call the Shellfish Sanitation Section at the number below for questions.)
OF	R
	Oysters (Requires Shellfish Certification <u>prior</u> to the purchase of this license. Call the Shellfish Sanitation Section at the number below for questions.)
	Clams (Requires Shellfish Certification <u>prior</u> to the purchase of this license. Call the Shellfish Sanitation Section at the number below for questions.)
	Hard and Soft Crabs
	Scallops
	Shrimp, including bait
	Finfish, including bait
	For required dealer reporting instructions or shellfish certification questions call 1-800-682-2632 or (252) 515-5500
Się	gnature: Applicant signature Date Must be signed to be valid



		North Carolina Department of Environmental Quality Division of Marine Fisheries LICENSE APPLICATION CERTIFICATION FORM (REV 2023-12)	OFFICE USE ONLY Year PID # License #				
<u>Ce</u>	rtification St	tatement (This section must be completed by applicant)					
Ι, _		certify that:	DMF Staff:				
1.	documentat documents l in termination	mation provided on this application and any supporting ion provided is true, accurate, and complete. And further, for renewal have been provided at the time of renewal. I understand that any falson of appropriate licenses, permits and related documents, revocatioges, and in possible criminal prosecution.	se information or fraudulent disclosures may result				
2.	I am a resid	ent of the State of :					
	If claiming re	esident status in North Carolina, I certify further that <i>(check one)</i> :					
		I have been a legal resident for more than six months, or					
		If domiciled in North Carolina between 60 days and six months, I ha notarized Certificate of Eligibility for North Carolina Residency.	ave completed and submitted with this application				
3.	 If applying for a Standard or Retired Standard Commercial Fishing License as a North Carolina Resident, I also certify that (ch the appropriate entry): 						
		I filed a North Carolina State Income Tax Return for the previous of	calendar or tax year.				
		I was not required to file a North Carolina State Income Tax Retur	n for the previous calendar or tax year.				
		d if there are any questions regarding the filing of a North Carolina S tax records, as requested by the Division of Marine Fisheries.	tate Income Tax Return, I may have to provide				
4.	For commer	cial fishing licenses, endorsements or registrations I certify that:					
		itly have no marine fisheries licenses, permits, endorsements, or reg e to hold such licenses, permits, endorsements, or registrations is no					
		not been convicted of four or more violations in any jurisdiction relate to marine or estuarine resources during the previous three years.	d to state or federal law or regulations involving or				
5.	NC General Statute §113-221 requires the NC Division of Marine Fisheries to provide a current copy of the rules governing activities authorized by the license you are purchasing. You have the right to request a current rulebook in hardbound. The document is available on the Division of Marine Fisheries website on the "Rules and Regulations" webpage at https://deq.nc.gov/about/divisions/marine-fisheries/rules-proclamations-and-size-and-bag-limits/rules .						
6.	For for-hire fishing licenses and endorsements, I affirm that I have liability insurance and that I am knowledgeable of USCG safety requirements for the vessel(s) used in the operation in accordance with G.S. 113-168.6.						
7.	If application is for a Standard/Retired Commercial Fishing License with a Shellfish Endorsement or a Shellfish License for NC Residents I affirm that I have received the required harvester training.						
8.	For Ocean F	Fishing Pier License, linear length of the pier and responsible parties	has not changed.				
9.	If applying for	or a Land or Sell License, I also certify that: (check the appropriate e	ntry)				
		I have a commercial fishing license issued by the state of	(Other than North Carolina).				
		I have a federal permit that allows commercial fishing.					
Sig	gnature of Ap	plicant:	Date:				
NC	OTARY (Only	NEW applications must be notarized)					

Sworn to and Subscribed before me this _____ day and year of _____, ____,

State: _____ County: _____

Notary Public: ______My Commission expires: _____