

North Carolina Department of Environmental Quality Division of Marine Fisheries LAND OR SELL LICENSE APPLICATION INSTRUCTIONS (REV 2022-03)

This application is to be completed and signed by individuals applying for a Land or Sell license. The Responsible Party (business agent) **OR** Vessel Master can purchase the Land or Sell License. Businesses requesting a license must have the Responsible Party **OR** Vessel Master 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.

Eligibility:

The owner or Vessel Master must have a vessel to be licensed that has a homeport listed on the U.S. Coast Guard Documentation or state vessel registration from any state other than North Carolina and wants to fish beyond the State's territorial (greater than 3 miles in the ocean) water and wants to land catch in North Carolina.

Additionally, the applicant must provide proof (Provide a **PHOTOCOPY**) of a valid and current commercial license to fish issued from another state and/or a federal permit that allows commercial fishing.

Provide a **PHOTOCOPY** of one of the following current picture identifications of responsible Party and/or Vessel Master:

- 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 written agreement partnership, a **PHOTOCOPY** of written partnership agreement.
- If not incorporated 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.

A Land or Sell License Application:

- Complete all the applicable Information, including Participant Identification number. This number is listed to the right of the word *Participant* # on your license. If you do not currently have a license with DMF, please leave this box blank.
- Information on the Vessel Master.
- All surveys must be completed.
- Sign the application.
- Complete the NC DMF License Certification Form. Form must be notarized if applying for a new license.

A **PHOTOCOPY** of valid out-of-state vessel registration or U.S. Coast Guard Vessel Documentation that has an out-of-state homeport. If applying for a transfer of ownership and the U.S Coast Guard Vessel Documentation is pending, a notarized bill of sale will be accepted.

Fees:

- See Commercial License and Permit Fee Sheet. If you need assistance, please contact any NC DMF License Office or call (252) 726-7021 or (800) 682-2632. There is a \$10.00 fee for replacing current/valid license.
- Method of payment: Personal check, money order or Cashier check. 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



Type of Business Entity (Circle One):

North Carolina Department of Environmental Quality Division of Marine Fisheries LAND OR SELL LICENSE APPLICATION (REV 2022-03)

Select One:	□ New	Applicati	ion □ Renew	□R	eplace [□ Update and/or	Change	of Vessel Master		
Existing License Number If renewal - this number is printed on the license to the right of the words Land or Sell License										
Select One: ☐ Individual ☐ Business Agent										
Individual or Business Agent Participant Information										
Participant I.D).	First Na	me	Middle	Name	Last Name	Suffix			
Participant I.D.		Busines	s Name:	<u> </u>		State of Incor	Charter State:			
Business Ow	ner Name (F,	, M, L)	Business Owner/A	Agent Name	(F, M, L)	Business Owner/Agent Name (F, M, L)				
Check One:		Ct-t- I D	State I.D. Military I.D.			Resident Alien I.D. Passport				
Driver's License No.	Ц	State I.D.	D. Military I.D. Expire Date /			/ Resident Allen I.D. I		Passport L		
			·							
Date of Birth		Primary	Residence (State)			E-mail Address	E-mail Address			
/	_/									
Race Gender: Phy			al Address		Mailing Address ☐ Check if same as physical address					
	M/F	-								
Height Weight Address 1:				Address 1:						
		Address	s 2:			Address 2:				
Eye Color	Hair Color	City: State: Zip:			City:	State:	: Zip:			
				'				•		
County: Country:					County: Country:					
Home Phone		l n	Rusinoss Dhono:	Fax:	Cellular Phone:					
nome Phone:			Business Phone:				Cellulal	I HOHE.		
() -	() -		()	_	()	-			
·········			,							

Partnership

Sole Proprietorship

LLC

Corporation



North Carolina Department of Environmental Quality Division of Marine Fisheries LAND OR SELL LICENSE APPLICATION

PLEASE COMPLETE REQUIRED ECONOMIC AND VESSEL SURVEY SECTIONS

Economic Su	urvey (mi	ust be c	ompleted	by Respo	onsible	Party)							
							At least 50% of income derived from commercial						
First Name Midd		iddle Na	me	Last Name		fishin	shing?						
							│ │ □ YI	=0	□ NO				
							וז ט		LI NO				
Vessel Surve	ey .												
				\/I									
Vessel Name:				Vessel Gro Tons:	oss				Vessel	Length:			
US Customs #:			Expire Date / /	Port of Lar	ndina:				Vessel Built:	Year			
State			Expire Date	Llamanartı					Numbe	of			
Registration #:			1 1	Homeport:					Crew:				
Must be com Participant I.			/essel Ma Name	ster's Info	ormatic	on Idlo No	<u></u>		Lost Name			Suffix	
Participant i.	.D.	FIISL	Name	Middle N		iule iva	name La		Lastiname	Last Name		Sullix	
Check One:													
Driver's Licen	se 🗆	State	I.D. 🗖	Military I.D.				Resident Alien I.D.			Passport		
No			Evnira D	ata				•					
No.			Expire Da	ale									
Data of Divide		Di	D : d	(Pasidonas (Stato)				sil Addroop					
Date of Birth		Prima	Primary Residence (State)				E-mail Address						
,	1												
//		Dby	Physical Address					Bo	00				
Race	Gender:	Fily	/Sical Addre	iress				Race					
	M / F												
		Address 1:					Address 1:						
Proignt Address 1.				_									
Address 2:							Δd	dress 2:					
Address 2 <u>.</u>			11000 <u>Z.</u>					7 144 175 2					
				.						.			
Eye Color Hair Color City:			State: Zip <u>:</u>				City: State: Zip:						
					_						•		
		Col	unty:		Co	ountry:		Co	unty:		Cou	ıntry:	
Home Phone	s Phone: Fax:			X:	Cellular Phone:								
()	-		()	-		()	-	•	()	-		
Cianatura													
Signature:	Applica	ınt signatı	ure (Must be si	igned to	be vali	d)		Date				



North Carolina Department of Environmental Quality **Division of Marine Fisheries** LICENSE APPLICATION CERTIFICATION FORM

OFFICE US PID # License #	SE ONLY	Year
DMF Staff:		

	FISH	(REV 2021-08)	
Се	rtificatio	n Statement (This section must be completed by applicant)	DMF Staff:
,		certify that:	
	docume docume termina	Information provided on this application and any supporting intation provided is true, accurate, and complete. And further, for renewal ints have been provided at the time of renewal. I understand that any falsion of appropriate licenses, permits and related documents, revocation os, and in possible criminal prosecution.	se information or fraudulent disclosures may result in
2.	I am a r	esident of the State of:	
	If claimi	ng resident status in North Carolina, I certify further that (check one):	
		I have been a legal resident for more than six months, or	
		If domiciled in North Carolina between 60 days and six months, I had notarized Certificate of Eligibility for North Carolina Residency.	ave completed and submitted with this application a
3.		ng for a Standard or Retired Standard Commercial Fishing License as a ate entry):	North Carolina Resident, I also certify that <i>(check the</i>
		I filed a North Carolina State Income Tax Return for the previous c	alendar or tax year.
		I was not required to file a North Carolina State Income Tax Return	n for the previous calendar or tax year.
		tand if there are any questions regarding the filing of a North Carolina St ate tax records, as requested by the Division of Marine Fisheries.	ate Income Tax Return, I may have to provide
ŀ.	For con	mercial fishing licenses, endorsements or registrations I certify that:	
		rrently have no marine fisheries licenses, permits, endorsements, or regi ilege to hold such licenses, permits, endorsements, or registrations is no	
		ve not been convicted of four or more violations in any jurisdiction related ted to marine or estuarine resources during the previous three years.	d to state or federal law or regulations involving or
5.	governi hardbou	eral Statute §113-221 requires the NC Division of Marine Fisheries to prong activities authorized by the license you are purchasing. You have the nd. The document is available on the Division of Marine Fisheries webs rtal.ncdenr.org/web/mf/rules-and-regulations .	right to request a current rulebook in
6.		ire fishing licenses and endorsements, I affirm that I have liability insuran nents for the vessel(s) used in the operation in accordance with G.S. 113-	
7 .		ation is for a Standard/Retired Commercial Fishing License with a Shellfi ts I affirm that I have received the required harvester training.	sh Endorsement or a Shellfish License for NC
3.	For Oce	an Fishing Pier License, linear length of the pier and responsible parties	has not changed.
).	If applyi	ng for a Land or Sell License, I also certify that: <i>(check the appropriate el</i>	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	ınature o	Applicant:	Date:
١C	TARY (nly NEW applications must be notarized)	
Sta	ate:	County:	
3w	orn to ar	d Subscribed before me this day and year of	
J۵	tary Pub	c: My Commission e	avnirae: