

North Carolina Department of Environmental Quality Division of Marine Fisheries STANDARD COMMERCIAL FISHING LICENSE (SCFL) TRANSFER (BUSINESS) APPLICATION INSTRUCTIONS (REV 2022-03)

This application is to be completed and signed by individuals who are transferring a Standard Commercial Fishing License. Both the **Transfer-To** and the **Transfer-From** participants are to complete, sign and notarize this application. 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.

Transfer Requirements:

A Standard Commercial Fishing License can only be transferred if both the **Transfer-From** and the **Transfer-To** have no current license suspensions or revocations. The license shall not be expired prior to transfer.

Examples are:

- Transferring the SCFL to a business in which you are also an owner of.
- Transferring the SCFL from a dissolved business (All owners of the dissolved business must sign this statement solidifying that they are in agreement with the transfer).
- Transferring the SCFL from a sold business.
- Transferring due to owner leaving the business.

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

• Driver's License; or

- Passport; or
- State Identification (issued by DMV); or
- Resident Alien Card (green card)

Military Identification; or

For the business, you must 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 <u>not</u> 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 Business SCFL transfer Application:

- Information on the **Transfer-From** to be completed on the application.
- Select an indicate if they will retain or transfer the commercial fishery landings history associated with the SCFL.
 option regarding transferring of the Landings History.
- The Transfer-From can <u>only</u> retain the landings history if the Transfer-From holds an additional SCFL or RSCFL and must indicate the additional SCFL or RSCFL number to associate to landings. If the Transfer-To does not have an additional SCFL or RSCFL, the landings <u>will be</u> transferred to the Transfer-To. The transfer of landings history is all or none.
- Information on the Transfer-To to be completed on the application.
- If you have moved to the state of North Carolina and have resided within the state for 60 days to six months and consider North Carolina as your permanent residence, you are required to complete the Certification of Eligibility for North Carolina Residency/Domicile Form and provide a photocopy of one of the following documents:
 - North Carolina Voter Registration Card; or
 - North Carolina State Identification Card; or
 - North Carolina Driver's License; or
 - Military Identification Card
- The **Transfer-To** and **Transfer-From** participants sign the application.
- Certification Statement Form For Transfers completed, signed and notarized by the Transfer-To and Transfer-From
- Certification form (A) is for when both parties are present at a notary. Certification form (B) is for when both parties cannot be present at the same in front of one notary and a second notary is required.



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Fees:

- The **Transfer-To** must pay a replacement fee of \$10.00 AND pay the difference in fees between:
- When the Transfer-To, who is a non-resident, is being transferred a resident SCFL, he/she must pay the difference in fees of North Carolina and the non-resident state fees. Refer to the non-resident state fees for SCFL. If you need assistance, please contact any NC DMF License Office or call (252) 726-7021 or (800) 682-2632.
- The Transfer-From is to surrender the SCFL/RSCFL to the NCDMF.

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. If vessel Master changes, you must file an updated application with the Division of Marine Fisheries within 5 days.

Mail to: North Carolina Division of Marine Fisheries

License Office PO Box 769

Morehead City, NC 28557



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Information to be Completed by the Transfer-From

(This number is printed on the license to the right of the words Standard Commercial Fishing License.)							
Select One: □ Individual or Busine	IIndividual	ant Information	□Business Age	nt			
Participant I.D. First Name			Middle Name	Last Name	Suffix		
Participant I.D.	Business N	lame:		State of Incorporation:	Charter State:		
Business Owner Nam	ne (F, M, L)	Business Owner/	Agent Name (F, M, L)	Business Owner/Agent Name (F, M, L)			
Landings Transfer (Select One) □ No – List SCFL number to associate landings - SCFL Number:							
☐ Yes (Defaults to yes, if only have 1 SCFL)							
Reason for SCFL Ti	ransfer (must se	lect one reason	for transfer)				
Transfer from self: I am transferring this SCFL to a business in which I am also an owner of.							
Transfer from a dissolved business: I am the owner of the dissolved business. (All owners of the dissolved business musics this statement solidifying that they are in agreement with this transfer.)							
sign this statement solidifying that they are in agreement with this transfer.)							
Transfer from a sold business: I am selling my business and transferring this license to the new successor. I certify that this transfer is being processed at the time of the sale of the business.							
Transfer due to owner leaving the business: I am leaving this business and want to transfer this license back to myself as an individual. This license was issued to me prior to it being issued to the business. I also certify that this transfer is being processed at the time of my leaving the business. (All owners of the business are required to sign this notarized certification statement.)							



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Information to be Completed by the Transfer-To

Type of Business Entity (Circle One):

NC Residency: ☐ Non-resident – less than 60 days ☐ 60 days – 6 months Complete the Certification of Eligibility for NC Residency Complete the Certification of Eligibility for NC Residency											
Select One:	□Indivi Business Aa		pant Information		∃Business A	gen	nt				
Participant I.I).	First Nan	ie	Middle	Middle Name		Last Name			Suffix	
Participant I.I	D.	Business	Business Name:				State of Incorporation:			Charter State:	
Business Ow	ner Name (F, I	M, L)	Business Owner/Agent Name (F, M, L)				Business Owner/Agent Name (F, M, L)				
Check One: Driver's Licer	ise 🗆	State I.D	. Military I.D.			Resident Alien I.D. Passp			Passpo	ort 🗆	
No.			Expire Date / /)							
Date of Birth		Primary F	Primary Residence (State)				E-mail Address				
/	_/										
Race	Gender:	Physical	Physical Address				Mailing Address ☐ Check if same as physical address				
M / F											
Height	Weight	Address	Address 1:					Address 1:			
Address 2:						Address 2:					
Eye Color	Hair Color	City: State: Zip:				City: State: Zip:					
County: Country:					County: Country:						
Home Phone	:		Business Phone: Fax:			Cellular Phone:			-		
() -		() -		() -	-		()	-		

Partnership

Sole Proprietorship

LLC

Corporation



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Single Vessel Corporations Must Complete this section with the Vessel Master's Information

Participant I.D.		First Name Middle		Name		Last Name			Suffix			
Check One: Driver's Licer	nse 🗆	State I.D.	Military I.D.			Resident Alien I.D. Pa		Passpo	Passport			
No.		E	xpire Date / /									
Date of Birth		Primary Residence (State)					E-mail Address					
/	_/											
Race	Gender: Physical Address					Mailing Address						
	M/F											
Height	Weight	Address 1:	Address 1:					Address 1:				
		Address 2:				Address 2:						
Eye Color	Hair Color	City: State: Zip:				City: State: Zip:						
		County:	County: Country:					County: Country:				
Home Phone	:	Business Phone:						Cellular Phone:				
() -		()	() -			() -			() -			
Economic S	<u>Survey</u> (mu	st be complete	ed by Res	ponsib	le Party)							
First Name		Middle Name	Last Name				t least 50% of income derived from ommercial fishing?					
							YES		□ NO			
			l									
Signature:												
		om t signature gned to be valid			Date							
Signature:												
Transfer-To signature Must be signed to be valid				Date								



North Carolina Department of Environmental Quality Division of Marine Fisheries

Certification Statement Form for Transfers - Business Standard Commercial Fishing License (SCFL) – FORM A (Must be completed, signed, and notarized by the Transfer-To and Transfer-From Participants)

*Ce	ertification Statement (This section must be completed by the Transfer-To Participant)						
I,	, certify that I have the authority to transfer the NC Division of Marine Fisheries						
(IVC	DIMF)						
	nse # currently issued in the name of (list me/business name printed on the license).						
Per	15A CAC 03O .0108 (8), I wish to transfer the SCFL for a Business and (check only one box):						
	Transfer from self: I certify I am transferring this SCFL to a business in which I am also an owner of.						
□ sigr	Transfer from a dissolved business: I certify that I am the owner of the dissolved business. (All owners of the dissolved business musin this statement solidifying that they are in agreement with this transfer.)						
□ this	Transfer from a sold business: I certify that I am selling my business and transferring this license to the new successor. I certify that transfer is being processed at the time of the sale of the business.						
an i	Transfer due to owner leaving the business: I certify that I am leaving this business and want to transfer this license back to myself as individual. This license was issued to me prior to it being issued to the business. I also certify that this transfer is being processed at the of my leaving the business. (All owners of the business are required to sign this notarized certification statement.)						
*Ce	e <mark>rtification Statement</mark> (This section must be completed by the Transfer-To Participant)						
I, _	, certify that:						
1.	All the information provided on this form and any supporting documentation provided is true, accurate, and complete. I understand that any false information or fraudulent disclosures may result in termination of appropriate licenses, permits and related documents, revocation or suspension of marine fisheries licensing and other privileges, and in possible criminal prosecution.						
2.	I am a resident of the State of: If claiming resident status in North Carolina, I certify further that (check only one box): I have been a legal resident for more than six months, or If domiciled in North Carolina between 60 days and six months, I have completed and submitted with this application a notarized Certificate of Eligibility for North Carolina Residency.						
3.	If accepting a Standard or Retired Standard Commercial Fishing License as a North Carolina Resident, I also certify that (check only one box): I filed a North Carolina State Income Tax Return for the previous calendar or tax year. I was not required to file a North Carolina State Income Tax Return for the previous calendar or tax year.						
	nderstand if any question arises concerning the filing of a North Carolina State Income Tax Return, I may have to provide appropriate ta ords, as requested by the Division of Marine Fisheries.						
4.	For commercial fishing licenses, permits, endorsements, or registrations: a) I currently have no marine fisheries licenses, permits, endorsements, or registrations under suspension or revocation and the privilege to hold such licenses, permits, endorsements, or registrations is not revoked or suspended. b) I have not been convicted of four or more violations in any jurisdiction related to state or federal law or regulations involving or related to marine or estuarine resources during the previous three years.						
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 or electronic format.						
6.	If the transfer is for a Standard Commercial Fishing License with a Shellfish Endorsement, I affirm that I have received the required harvester training.						
Dat	e Signed: Date Signed:						
Sig	nature of Transfer-To Signature of Transfer-From						
NO	TARY (All To/From business applications must be notarized)						
Stat	e:County:						
Swo	orn to and Subscribed before me thisday of,,						
Nota	ary Public:My Commission expires:						



North Carolina Department of Environmental Quality Division of Marine Fisheries

Certification Statement Form for Transfers - Business Standard Commercial Fishing License (SCFL) – FORM B (Must be completed, signed, and notarized by the Transfer-To and Transfer-From Participants)

I,	, certify that I hav	ve the authority to transfer this license #					
curre licen	ently issued in the name ofse).	(list name/business name printed on the					
Per :	15A CAC 03O .0108 (8) I/we wish to transfer our Standard Comr	nercial Fishing License for a Business (select one option).					
	I certify I am transferring this SCFL to a business in which I am a	also an owner of.					
	sign this statement – advising that they are in agreement with this transfer. Transfer from a Sold Business: I certify that I am selling my business and transferring this license to the new successor. I certify that this is being processed at the time of the sale of the business.						
Cert	ification Statement (This section must be completed by the Tra						
l,		, certify that:					
	. All the information provided on this form and any supporting documentation provided is true, accurate, and complete. I understand the any false information or fraudulent disclosures may result in termination of appropriate licenses, permits and related documents, revocation or suspension of marine fisheries licensing and other privileges, and in possible criminal prosecution.						
2.	 I am a resident of the State of:						
3.	If accepting a Standard Commercial Fishing License as a North Carolina Resident, I also certify that (only check one): ☐ I filed a North Carolina State Income Tax Return for the previous calendar or tax year. ☐ I was not required to file a North Carolina State Income Tax Return for the previous calendar or tax year.						
	derstand if any question arises concerning the filing of a North Cards, as requested by the Division of Marine Fisheries.	arolina State Income Tax Return, I may have to provide appropriate tax					
4.	and the privilege to hold such licenses, permits, en	oits, endorsements, or registrations under suspension or revocation indorsements, or registrations is not revoked or suspended. s in any jurisdiction related to state or federal law or regulations					
		e Fisheries to provide a current copy of the rules governing activities ht to request a current rulebook in hardbound or electronic format.					
	harvester training.	a Shellfish Endorsement, I affirm that I have received the required					
	ısfer-To:	Transfer-From:					
Date	Signed:	Date Signed:					
Sign	ature of Transfer-To	Signature of Transfer-From					
NOT/ State	ARY :: County	NOTARY State: County					
	, Notary Public, do hereby	I,, Notary Public, do hereby					
before the for capaci this th	y thatpersonally appeared re me this day, acknowledging to me that he/she voluntarily signed pregoing document for the purpose stated therein and in the city indicated. WITNESS my hand and seal, he day of, 20	certify thatpersonally appeared before me this day, acknowledging to me that he/she voluntarily signed the foregoing document for the purpose stated therein and in the capacity indicated. WITNESS my hand and seal, this the day of, 20					
	ry Public	Notary Public					
My C	Commission Expires	My Commission Expires					