

APPLICATION FOR LICENSE TRANSFER

TYPE OF LICENSE TRANSFER

 □ Finfish Import ♦ □ Res. Comm. Fishing Boat ■ □ Non-Res. Comm. Fishing Boat ■ 	\$25.00 \$10.00 \$10.00	 □ Bait Shrimp Dealer ♦ □ Bait Dealer–Building ● □ Bait Dealer–Vehicle ● 	\$25.00 \$25.00 \$25.00	
 □ Wholesale Fish Dealer ♦ □ Wholesale Fish Dealer's Truck ● 	\$25.00 \$25.00	□ Retail Fish Dealer ♦ □ Retail Fish Dealer's Truck ●	\$25.00 \$25.00	
LICENSE NO. BEING TRANSFERRED		DATE LICENSE TRANSFERRED		
REQUIRED INFORMATION				
APPLICANT				
Last Name		First Name		
Customer Number				
Driver's License: State No		Date of Birth		
Social Security Number	Er	nail		
BUSINESS				
Business Name	Dealer No			
Mailing Address				
City	State _	Zip	_	
Tax ID No	Phone	No. ()		
♦ FOR LICENSES listed above with this symbol, Business Name (if different than above)				
· · · · ·				
Location Address (Physical Location, no P.O. Box)				
City State	e ۷	ιρ County		
• FOR LICENSES listed above with this symbol,	this information i	s REQUIRED or application will be denied:		
Model	Ma	ke		
License Plate State No	Mot	tor No. (VIN)		
Year Home Base				
■ FOR BOAT: (must surrender original license <u>ANI</u> Copy of current USCG Cert of Documentation or Sta		st be provided.		
USCG Cert of Documentation No	OF	R State Reg. No		
Boat Length feet inches	Boat N	lame		
Previous Owner		Horsepower		

I understand that by transferring this license, I am acting as sole owner or as the agent of all the members of any partnership, corporation or estate which may have rights to this license. I am authorized to transfer this license, including the right to renew this license. This license is currently valid and has not been previously transferred or sold.

If I am applying to transfer a wholesale fish dealer's license, I certify that I do not hold a bait shrimp dealer's license.

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Under penalty of law, I hereby certify that all statements, on pages one and two of this application, are true and correct. I understand that it is a crime to make a false statement on this form.

CURRENT LICENSE HOLDER

Signature	Printed Name	Date
APPLICANT		
Signature	Printed Name	Date
Employee Witness	Office Code	Date
Must be not	arized if not signed before TPWD Law Enfor	cement sales staff.
whose identity is known to me. After	day personally appeared I administered an oath to him, upon his oath, he said n his personal knowledge, and are true and correct.	, a person he read the Application for License Transfer,
Signature of Current License Holde	r Printed Name	
	day personally appeared I administered an oath to him, upon his oath, he said n his personal knowledge, and are true and correct.	, a person he read the Application for License Transfer,
Signature of Applicant	Printed Name	
SWORN TO AND SUBSCRIBED BE	FORE ME by	,
on this the day of	, 20	
NOTARY PUBLIC, STATE OF TEXA	<u>S</u>	
Printed name of notary		
My commission expires		

Texas Parks and Wildlife Department maintains the information collected through this form. With few exceptions, you are entitled to be informed about the information we collect. Under Sections 552.021 and 552.023 of the Texas Government Code, you are also entitled to receive and review the information. Under Section 559.004, you are also entitled to have this information corrected. Please note that the customer information collected through this form, including name, address, and telephone number, is considered public and is subject to disclosure under 31 Tex. Admin. Code § 51.303.