APPLICATION FOR COMMERCIAL OYSTER BOAT

☐ Resident OYSTER (306) – $441 ☐ Non-Resident OYSTER (406) – $1,764

Boat Owner Last Name ____________________________________ First Name ____________________________________

Customer Number ____________________________________ Phone No. ____________________________________

Drivers License: State _____ No. _____________________________ Date of Birth _________________________

Mailing Address ______________________________________

City __________________________________________________ State ________ Zip _________________________

Physical Address ______________________________________

City ________________________________________________ State ________ Zip _________________________

USCG Documentation Number ______________________ OR State _____ Reg. No. ______________________

Boat Length _____ ft. _____ in. (from USCG documentation) Horsepower _____ BHP Boat Name______________________

Home Port ________________________________ Primary Bay System Fished ________________________________

This license, presented for renewal, is currently valid and has not been previously transferred or sold. I am eligible for this license under the limited entry program criteria established by TPWD. I understand it is a crime to make a false statement on this form.

Applicant Signature __________________________________________ Date _______________

Employee Witness __________________________________ Office ___________________ Date _______________

Original TPWD issued license proving eligibility was presented.

Must be notarized if not signed before TPWD Law Enforcement sales staff.

Before me, a notary public, on this day personally appeared ___________________________________________, a person whose identity is known to me. After I administered an oath to him, upon his oath, he said he read the Application for a Commercial Oyster Boat License, and that the facts stated in it are within his personal knowledge, and are true and correct.

________________________________________
Signature of Applicant

To designate an authorized agent, enter the info here:

The applicant designated ________________________, DL# ____________________, DOB ________________ as an authorized agent to conduct the 20____ renewal of this license on the applicant’s behalf.

SWORN TO AND SUBSCRIBED BEFORE ME by ____________________________,

on this the ________ day of _____________________, 20____.

NOTARY PUBLIC, STATE OF TEXAS

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.