APPLICATION FOR COMMERCIAL FINFISH FISHERMAN’S LICENSE

☐ Resident (371) – $360  ☐ Non-Resident (361) – $1,440

Applicant 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 _________________________

Plate Number ___________________________

I understand that I may hold no more than three of these licenses and that only one set of plates may be on board a boat at any time the boat is used for commercial finfish purposes. This license is currently valid and has not been previously transferred or sold. I am eligible for this license under the limited entry criteria established by TPWD. I understand that 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.

(initial)

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 Finfish Fisherman’s 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.