

**Texas Parks and Wildlife Department** 

4200 Smith School Road, Austin, TX 78744 (800) 792-1112

APPLICATION TO TRANSFER CRAB FISHERMAN'S LICENSE

ONLY ONE LICENSE PER FORM (Must surrender original license for transfer of license holder.)

LICENSE NUMBER	DATE OF
BEING TRANSFERRED	LICENSE TRANSFER
NAME OF CURRENT	DRIVER'S LICENSE
LICENSE HOLDER	STATE NO

PLATE NUMBER BEING TRANSFERRED \_\_\_\_\_

## **TYPE OF LICENSE BEING TRANSFERRED:**

- □ Resident Commercial Crab Fisherman's License (338-\$630)
- □ Non-Resident Commercial Crab Fisherman's License (438-\$2,520)
- □ Transfer to an heir based on death of original license holder (\$10) (Requires documentation of heirship status)

I understand that by transferring this license to (applicant), that 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, and I understand that I am relinquishing all the rights and privileges associated with this license, including the right to renewal. This license is currently valid and has not been previously transferred or sold. I hereby surrender the original TPWD issued license.

Under penalty of law, I hereby certify that all these statements are true and correct.

Signature of Current License Holder	Date	
Employee Witness	Office	Date
(initial) Original TPWD issued license pro	oving eligibility was presented.	
MUST BE NOTARIZED IF NOT SIG	NED BEFORE TPWD LAW EN	FORCEMENT SALES STAFF
Before me, a notary public, on this day personally a whose identity is known to me. After I administered Commercial Crab Fisherman's License, and that the fa	ppeared d an oath to him, upon his oath, acts stated in it are within his perso	, a person he said he read the Application to Transfer a nal knowledge, and are true and correct.
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		

## **REQUIRED INFORMATION**

Applicant Last Name	First Name	First Name	
Customer Number	Phone No	Phone No.	
Email			
Drivers License: State No	Date	Date of Birth	
Social Security Number			
Mailing Address			
City	State	Zip	
Physical Address			
City	State	Zip	
	crabbing purposes. This license is curre se under the limited entry criteria establ m. r, who has died. I understand it is a crir	ntly valid and has not been previously ished by TPWD. I understand that it is	
form. I hereby certify that all these sta	tements are true and correct.		
Applicant Signature		Date	
Employee Witness	Office	Date	
MUST BE NOTARIZED IF NOT	SIGNED BEFORE TPWD LAW ENFO	RCEMENT SALES STAFF	
Before me, a notary public, on this day persona whose identity is known to me. After I adminis Commercial Crab Fisherman's License, and that t To designate an authorized agent, enter the in	tered an oath to him, upon his oath, he s the facts stated in it are within his personal l	aid he read the Application to Transfer a	
The applicant designated as an <b>authorized agent</b> to conduct the 20_			
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.