



LAND OR SELL LICENSE APPLICATION INSTRUCTIONS

This application is to be completed and signed by individuals applying for a Land or Sell license. The Responsible Party (business agent) **OR** Vessel Master can purchase the Land or Sell License. Businesses requesting a license must have the Responsible Party **OR** Vessel Master complete and sign the application. The Responsible Party is the person who coordinates, supervises or otherwise directs operations of a business entity, such as a corporate officer or executive-level supervisor of business operations and is the person responsible for use of the issued license in compliance with applicable laws and regulations. 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.

- Eligibility: The owner or Vessel Master must have a vessel to be licensed that has a homeport listed on the U.S. Coast Guard Documentation or state vessel registration from any state other than North Carolina and wants to fish beyond the State's territorial (greater than 3 miles in the ocean) water and wants to land catch in North Carolina.
- Additionally, the applicant must provide proof (Provide a **PHOTOCOPY**) of a valid and current commercial license to fish issued from another state and/or a federal permit that allows commercial fishing.
- A. Provide a **PHOTOCOPY** of one of the following current picture identifications of responsible Party and/or Vessel Master:
- | | |
|---|-------------------------------------|
| 1. Driver's License; or | 3. Military Identification; or |
| 2. State Identification (issued by DMV); or | 4. Passport; or |
| | 5. Resident Alien Card (green card) |
- B. If you are applying as a business, you must provide:
1. If incorporated, a **PHOTOCOPY** of Articles of Incorporation and list of current corporate holders.
 2. If written agreement partnership, a **PHOTOCOPY** of written partnership agreement.
 3. If not incorporated or written partnership, a **PHOTOCOPY** of current assumed name statements, if filed, and a **PHOTOCOPY** of business privilege tax certificates, if applicable.
- C. A **Land or Sell** License Application must have the following:
1. Check one:
 - a. New application (i.e., new license)
 - b. Renewing
 - c. Updating current license and/or change of Vessel Master
 - d. Replacing a current license
 2. **Land or Sell** License numbers, if renewing the license. This number is printed on the license to the right of the words *Land or Sell License*.
 3. State of residency.
 4. Complete all the applicable Participant Information, including Participant Identification number. This number is listed to the right of the word *Participant #* on your license. If you do not currently have a license with DMF, please leave this box blank.
 5. Information on the Vessel Master.
 6. All surveys must be completed.
 7. Sign the application.
 8. Completed Certification Statement Form. It must be notarized if applying for a new license.
- D. A **PHOTOCOPY** of valid out-of-state vessel registration or U.S. Coast Guard Vessel Documentation that has an out-of-state homeport. If applying for a transfer of ownership and the U.S. Coast Guard Vessel Documentation is pending, a notarized bill of sale will be accepted.
- E. Provide a **PHOTOCOPY** of valid out-of-state commercial license to fish or federal permit that allows commercial fishing.
- F. Fees:
1. \$200.00 or an amount charged to North Carolina residents in the non-resident state, whichever is greater (Call DMF License Office at 252-726-7021 or 800-682-2632 for a copy of the most current fee schedule).
 2. \$10.00 replacement fee for replacing current/valid license.
- G. Method of payment: Personal check, money order or Cashier check. Make payable to *North Carolina Division of Marine Fisheries*. There will be a \$25.00 service charge for returned checks.

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.

**Mail to: NCDMF
License Office
PO Box 769
Morehead City, NC 28557**

North Carolina Division of Marine Fisheries

Application for Land or Sell License

Check one:	<input type="checkbox"/> New Application
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OR

Check one:	<input type="checkbox"/> Renew	<input type="checkbox"/> Replace	<input type="checkbox"/> Update and/or Change of Vessel Master
Existing License Number <small>(License number is printed on license)</small>			

Check one: **Individual** (complete the Individual Participant Information) **Business Agent** (complete the Business Participant Information and Individual Participant Information)

Individual or Business Agent Participant Information

Participant I.D.		First Name		Middle Name		Last Name		Suffix	
Driver's License No.		State I.D. No.		Military I.D. No.		Resident Alien I.D. No.		Passport No.	
Expire Date / /		Expire Date / /		Expire Date / /		Expire Date / /		Expire Date / /	
Date of Birth ____ / ____ / ____		Primary Residence (State)				Secondary Residence (State)		E-mail Address	
Race	Gender: M / F	Physical Address				Mailing Address <input type="checkbox"/> Check if same as physical address			
Height	Weight	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: () -			

Type of Business Entity (Circle One): Corporation Partnership Sole Proprietorship LLC Academia

Business Participant Information (This section must be completed for the application of a license for use by a business)

Participant I.D.		Business Name:			State of Incorporation:		Charter State:	
Business Phone: () -		Cellular Phone: () -		Home Phone: () -		Fax: () -		E-mail Address:
Business Owner Name (F, M, L)		Physical Address				Mailing Address <input type="checkbox"/> Check if same as physical address		
Business Owner Name (F, M, L)		Address 1: _____				Address 1: _____		
Business Owner Name (F, M, L)		Address 2: _____				Address 2: _____		
Business Owner Name (F, M, L)		City: _____ State: _____ Zip: _____				City: _____ State: _____ Zip: _____		
Business Owner Name (F, M, L)		County: _____ Country: _____				County: _____ Country: _____		

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North Carolina Division of Marine Fisheries

Certification Statement Form For New Licenses

(Must be completed, signed, and notarized for each license transaction)

Certification Statement (This section must be completed by Applicant)

I, _____ certify that:

- 1. All the information provided on this application and any supporting documentation provided is true, accurate, and complete. And further, for renewals, any changes in information or supporting documents have been provided at the time of renewal.
2. I am a resident of the State of: _____

If claiming resident status in North Carolina, I certify further that (check one):

- checkbox I have been a legal resident for more than six months, or
checkbox 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 applying for a Standard or Retired Standard Commercial Fishing License as a North Carolina Resident, I also certify that: (initial the appropriate entry)

- _____ 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.

- 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.

I understand if any question arises concerning the filing of a North Carolina State Income Tax Return, I may have to provide appropriate tax records, as requested by the Division of Marine Fisheries.

I understand that any false information or fraudulent disclosures may result in termination of appropriate licenses and related documents, revocation or suspension of marine fisheries licensing and other privileges, and in possible criminal prosecution.

Date Signed: _____

Signature of Applicant _____

NOTARY (All new applications must be notarized)

State: _____

County: _____

Sworn to and Subscribed before me this _____ day of _____, _____

Notary Public: _____ My Commission expires: _____