

DEPARTMENT OF AGRICULTURE - BUREAU OF AQUACULTURE

P.O. Box 97
Milford, Conn. 06460

Telephone: (203) 874-0696

LICENSE RECORD FORM

Seed
License _____
License No. _____
Exp. Date _____
Trans./S.S. License _____
License No. _____
Exp. Date _____
Conch License _____
License No. _____
Exp. Date _____

Applicant Identification

Name of Applicant _____	Mailing Address _____
Residence Address _____	Telephone Number & Social Security Number _____

Boat Identification:

<u>Boat #1</u>	Registration No. _____	Length _____	Color _____
<u>Boat #2</u>	Registration No. _____	Length _____	Color _____
<u>Boat #3</u>	Registration No. _____	Length _____	Color _____
<u>Boat #4</u>	Registration No. _____	Length _____	Color _____

<u>Type of License Applied For:</u>	<u>Fee</u>	<u>Requirements Oysters Being Landed</u>
____ Boat	\$15.00	Red tag or marker with seed number for oysters harvested from Prohibited areas.
____ Personal	\$10.00	Yellow tag or marker with seed number for oysters harvested from Restricted-Relay areas.
____ Conch	\$100.00	

<u>Type of Equipment:</u>	Helpers
____ Rake	_____
____ Tongs	Name, Address, Telephone Number & Social Security Number
____ Dredge	_____
____ Other	Name, Address, Telephone Number & Social Security Number
____ Conch Pots	_____
_____ Number Used	Name, Address, Telephone Number & Social Security Number

MAKE CHECK OR MONEY ORDER PAYABLE TO: COMMISSIONER OF AGRICULTURE

Public Act 82-91 requires that all boats and persons be licensed to work any natural shellfish bed in the State.