

Department of Natural Resources and Environmental Control Division of Fish and Wildlife Charter Boat or Head Boat License Application



This is an application for: (Please check the appropriate box)		
Resident Head Boat		\$300.00
Non-Resident Head Boat		\$600.00
Resident Charter Boat		\$150.00
Non-Resident Charter Boat		\$300.00
Vessel Owner Last Name:		
Vessel Owner First Name:		
Vessel Owner Middle Name:		
Vessel Owner Physical Address:		
Vessel Owner City:	State:	Zip Code:
Vessel Owner Mailing Address:		
Vessel Owner City:	State:	Zip Code:
Vessel Owner Phone Number:		
Vessel Owner Driver's License Number:		Must attach copy
Vessel Owner Social Security Number: _	-	
Vessel Owner Date of Birth:		
Vessel Owner Captain's License: If the vessel owner is not a licensed captain, a o		
Boat Registration or Documentation Nu Must be valid and registered or documented for		
Company Name (if applicable):		
Vessel Owner El Number (if applicable):		
Boat Name:	Boat Lei	ngth:
Boat Capacity (Passengers):	Home Port or Area of	Operation:
Signature of Vessel Owner	 Date	Amount Enclosed

*** Please remember to enclose copies of the <u>mandatory items</u> required to process your application. ***

*** Licenses cannot be processed without this information. ***

CHARTER/HEAD BOAT APPLICATIONS ARE ACCEPTED BY MAIL, FAX, EMAIL OR ONLINE.

Mail: ATTN: RECREATIONAL LICENSING, Division of Fish and Wildlife, 89 Kings Highway, Dover, DE 19901 Fax: 302-736-7925 (call to confirm); E-mail: DFWreclic@delaware.gov; Telephone: 302-739-9918 Online: https://de.gov/DigitalDNREC (online applications must be completed by the vessel owner)

Checks should be payable to: Division of Fish and Wildlife

PLEASE ALLOW 4 WEEKS FOR PROCESSING APPLICATIONS

*** PLEASE USE THE NEXT PAGE TO ADD ADDITIONAL OPERATORS ***

Operator 1 Date of Birth: ____

ADDITIONAL OPERATORS

Please complete the following information for each additional operator. Only the operators listed on this application will be permitted to use the charter/head boat license.

Operator 2 Last Name:		
Operator 2 First Name:		
Operator 2 Address:		
Operator 2 City:	State:	Zip Code:
Operator 2 Phone Number:		
Operator 2 Date of Birth:		
Operator 3 Last Name:		
Operator 3 First Name:		
Operator 3 Address:		
Operator 3 City:	State:	Zip Code:
Operator 3 Phone Number:		
Operator 3 Date of Birth:		
Operator 4 Last Name:		
Operator 4 First Name:		
Operator 4 Address:		
Operator 4 City:	State:	Zip Code:
Operator 4 Phone Number:		
Operator 4 Date of Birth:		

Operator 5 Last Name:
Operator 5 First Name:
Operator 5 Address:
Operator 5 City:
Operator 5 State:
Operator 5 Zip Code:
Operator 5 Phone Number:
Operator 5 Date of Birth:
Operator 6 Last Name:
Operator 6 First Name:
Operator 6 Address:
Operator 6 City:
Operator 6 State:
Operator 6 Zip Code:
Operator 6 Phone Number:
Operator 6 Date of Birth:
Operator 7 Last Name:
Operator 7 First Name:
Operator 7 Address:
Operator 7 City:
Operator 7 State:
Operator 7 Zip Code:
Operator 7 Phone Number:
Operator 7 Date of Birth: