Marine Resources ELVER EXPORTER 2024

lease provide all information quested. Incomplete oplications will be returned r correction.	Part A: Applicant Information Business Name:
	Fed Employer ID#:
	Part C: Vehicle Information ARE NOT REFUNDABLE. Fee \$5000 \$5000 Please complete for vehicle to be licensed to transport elvers: Is this vehicle ownedleasedrented? If leased or rented send a copy of the lease or rental agreement. Registration #Make Vehicle ID No ModelYearColor
A MRS section 453. Signature (Owner or an Aut Please Print Name Under Title 12, \$6306, (1)(2) a Marine Patrol Officer. Failure \$6306. Consent to inspection 1. Consent to inspection. Any a duty to submit to inspection a A. Watercraft or vehicles an under this Part may be searc B. Any other location where C. A location specified in pa D. No residential dwelling r 2. Seizure of evidence. Any p duty to permit seizure of evide	Part D: Certification egoing information is true and correct. Making any false statement on this license application is punishable under Title 17

For Corporations with six or fewer sharehold Last Name First Last Name First Last Name First Last Name First	NameI	DOBS	SS#	%
Last Name First				%
	NameI	DOBS		
Last Name First			SS#	%
	Namel	DOBS	SS#	%
Last Name First	Name]	DOBS	SS#	%
Last Name First	Namel	DOBS	SS#	%
Last Name First	Name1	DOBS	SS#	%
For Corporations with greater than six sl	nareholders, please identif	fy Agent's name	that is listed on your	corporation documents.
Last Name F	First Name	, A	Address	
City, S	State	, I	Phone #	

INSTRUCTIONS:

Complete the information in Part A on the front of this form. Check license(s) requested in Part B and calculate the total fees. Fill out all applicable information in Part C. Certify your application with your signature in Part D. Enclose this document in an envelope along with a check or money order payable to Treasurer, State of Maine or fill out the section below for credit card payments, affix a stamp and put it in the mail. We cannot accept applications by fax or phone. If you have questions, call (207) 624-6550.

Mail to:

Licensing Division Department of Marine Resources 21 State House Station Augusta, ME 04333

Please make all checks/money orders payable to: Treasurer State of Maine

Your check will be processed as an <u>electronic</u> funds transfer (EFT).

□ Please check this box if your bank does NOT accept EFT transactions so we can manually submit your check to the bank for processing. Please be aware that if an EFT transaction gets rejected by the bank, you will be responsible for the payment as well as a \$20.00 bank fee.

Credit/debit card payments: I authorize the State of Maine, Department of Marine Resources, Licensing Division, to charge my VISA □ MasterCard □ Discover □ Debit card □

First Name	Last Name	
MUST BE AS IT APPEARS	CARD – PLEASE PRINT LEGIBLY AS THIS MAY AFFECT PROCESSING OF APPLICAT	ΓΙΟΝ
Card No	, CVV# expiration date	_
Signature of Cardholder:	Date:	

Your credit card or checking account will be charged for what you have applied for on this application

Check us out online at: MAINE.GOV/DMR