



INSTRUCTIONS

RECREATIONAL COMMERCIAL GEAR LICENSE APPLICATION

Applications are to be completed and signed by individuals who are to be licensed.

If you are an individual, you must complete the **Recreational Commercial Gear License Application**.

- A. Provide **PHOTOCOPY** of one of the following current picture identifications:
 - 1. Driver's License; or
 - 2. State Identification (issued by DMV); or
 - 3. Military Identification; or
 - 4. Passport; or
 - 5. Resident Alien Card (green card)

- B. **Recreational Commercial Gear License Application**

- C. If you have moved to the state of North Carolina and have resided within the state for 60 days to six months and consider North Carolina as your permanent residence, you are required to complete the Certification of Eligibility for North Carolina Residency/Domicile and provide a photocopy of one of the following documents:
 - 1. North Carolina Voter Registration card; or
 - 2. North Carolina State Identification card; or
 - 3. North Carolina Driver's License; or
 - 4. Military Identification card

- D. Sign the Application.

- E. Fees:
 - 1. \$70.00 North Carolina Residents
 - 2. \$500.00 Non-Residents
 - 3. \$7.00 replacement fee for replacing current/valid license.

- F. 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 Recreational Commercial Gear License (RCGL)

Check One:

- New Application
- Renew

WRC I.D. # (If renewing)		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.	
Exp date:		Exp date:		Exp date:		Exp date:		Exp date:	
Date of Birth		Primary Residence				Secondary Residence		E-mail Address	
____ / ____ / ____									
Race:	Gender:	Physical Address				Mailing Address			
	M / F								
		Address 1: _____				Address 1: _____			
		Address 2: _____				Address 2: _____			
		City: _____ State: _____ Zip: _____				City: _____ State: _____ Zip: _____			
		County: _____ Country: _____				County: _____ Country: _____			
Home Phone:		Business Phone:		Fax:		Cellular Phone:			
() -		() -		() -		() -			

Check One:

- NC Resident
- Non-Resident – less than 60 days
- Military stationed in NC**
- Student in NC School**

**** Must provide documentation as proof of residency.**

Signature: _____
Applicant signature
Date
Must be signed to be valid