STANDARD COMMERCIAL FISHING LICENSE (SCFL)
OR
RETIRED STANDARD COMMERCIAL FISHING LICENSE (RSCFL)
TRANSFER APPLICATION INSTRUCTIONS

This application is to be completed and signed by individuals who are transferring a commercial fishing license. Both the **Transfer- To** and the **Transfer-From** participants are to complete, sign and notarize this application. Businesses requesting a license must have the Responsible Party (business agent) complete and sign the application. The Responsible Party (business agent) 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.

Single vessel corporations must provide Master of the Vessel information. By doing this, single vessel corporations **do not** have to assign the Standard Commercial Fishing License, but if the Master of the Vessel changes, you must notify the Division with 5 days.

Transfer Requirements

A Standard Commercial Fishing License or Retired Standard Commercial Fishing License can only be transferred if both the **Transfer-From** and the **Transfer-To** have no current license suspensions or revocations

If transferring is because of retirement from commercial fishing, the **Transfer-From** must submit evidence of retirement. Examples are:

a. Evidence of the transfer of all licensee's SCFL/RSCFL.
b. Sale of all licensee's commercial fishing registered vessels.
c. Discontinuation of any active involvement in commercial fishing.

In case of death of the license holder, the license can be transferred to the following:

a. To the Administrator or Executor of the estate.
b. From the Administrator or Executor of the estate to an immediate family member (mother, father, brother, sister, spouse, child, stepparent, stepbrother, stepsister, or stepchild of the deceased).
c. From the immediate family member of the deceased to a third-party purchaser of the deceased licensee's fishing vessel.

***** The Administrator/Executor must provide a copy of the deceased licensee's Death Certificate, a **PHOTOCOPY** of the Certificate of Administration and a list of eligible immediate family members to the Morehead City License Office.

The Standard Commercial Fishing or Retired Standard Commercial Fishing License Transfer Application must have the following:

I. Information on the **Transfer-From** to be completed on the application

A. Information on the Standard or Retired Commercial Fishing License (**Transfer-From**) holder:
1. Participant Identification Number. This number is listed to the right of the word *Participant #* on your license.
2. Standard or Retired Commercial Fishing License holder's name (First, Middle, Last, Suffix).
3. Standard or Retired Commercial Fishing License number to be transferred. This number is printed on the license to the right of the words *Retired or Standard Commercial Fishing License*.

B. Transfer of Landings History (check one only)
1. At the time of transfer, the **Transfer-From** must indicate retainment or transfer of commercial fishery landings history associated with that SCFL or RSCFL.
2. The **Transfer-From** can only retain the landings history if the **Transfer-From** holds an additional SCFL or RSCFL and must indicate the additional SCFL or RSCFL number to associate to landings. If the **Transfer-To** does not have an additional SCFL or RSCFL, the landings will be transferred to the **Transfer-To**.
3. Transfer of landings history is all or none.

***** If select No, indicate the additional SCFL/RSCFL number that you have to associate the historical landings to.

C. Check one only (Reason for Transfer)
1. Deceased – To Administrator/Executor
2. Deceased – From Administrator/Executor to Immediate Family.
3. Deceased – From Immediate Family to third-party purchaser of the deceased licensee's fishing vessel.

4. Sale of vessel
5. Retirement from commercial fishing (must provide evidence – see above)
6. Other – must list reason.

II. Information on the **Transfer-To** on the application

A. Individual applicants, Responsible Party (business agents) for business applicants must provide a **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. 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 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. Endorsements (optional)
1. Only individual North Carolina residents are eligible for the Shellfish Endorsement (Businesses are not eligible for the Shellfish Endorsement.)

D. Proof of Residency of **Transfer-To**

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 Form 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

E. The **Transfer-To** and **Transfer-From** participants sign the application.

F. Certification Statement Form For Transfers completed, signed by the **Transfer-To and Transfer-From** Applicant and notarized.

G. Fees:
1. The **Transfer-To** must pay a replacement fee of $10.00 AND
2. The **Transfer-To** must pay the difference in fees between:
   a. When the **Transfer-To,** who is a non-resident, is being transferred a resident SCFL or RSCFL, he/she must pay the difference in fees of North Carolina and the non-resident state fees. Refer to the non-resident state fees for SCFL/RSCFL to calculate (enclosed)

Example 1: SCFL = $487.00

Virginia Non-resident SCFL fee = $677.00
Minus NC resident fee = - $200.00

Difference = $477.00
Plus NC transfer fee = +$ 10.00
$487.00

Example 2: RSCFL = $710.00

Other state Non-resident RSCFL fee = $800.00
Minus NC resident fee = - $100.00

Difference = $700.00
Plus NC transfer fee = +$ 10.00
$710.00

a. When the license to be transferred is a RSCFL and the **Transfer-To** is less than 65 years of age (North Carolina residents)
   $110.00 ($100.00 plus $10.00 transfer fee)

b. Method of Payment: Personal check, money order or Cashier's Check. Make payable to the North Carolina Division of Marine Fisheries. There will be a $25.00 service charge for returned checks.

H. The **Transfer-From** is to surrender the SCFL/RSCFL to the NCDMF.
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. If vessel Master changes, you must file an updated application with the Division of Marine Fisheries within 5 days.

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

Application To Transfer Standard Commercial Fishing License (SCFL) or Retired Standard Commercial Fishing License (RSCFL)

Check One: ☐ **Transfer** SCFL and Endorsements (Shellfish endorsements can only be transferred to individual NC residents)

☐ **Transfer** RSCFL and Endorsement (Shellfish endorsements can only be transferred to individual NC residents)

Information to be Completed by the Transfer-From

Participant I.D.	First Name	Middle Name	Last Name	Suffix	SCFL/RSCFL Number to be Transferred

LANDINGS TRANSFER **(check one only)** ☐ No- List SCFL/RSCFL number to associate landings → SCFL / RSCFL Number ☐ Yes- (defaults to yes, if only have 1 SCFL/RSCFL)

Reason for SCFL Transfer (must select one reason for transfer)

☐	Deceased – To Administrator/Executor	☐	Sale of Vessel
☐	Deceased – From Administrator/Executor to Immediate Family	☐	Retirement from Commercial Fishing (must provide evidence)
☐	Deceased – From Immediate Family to Third Party Purchases of Deceased Licensee's Fishing Vessel	☐	Other

Information to be Completed by the Transfer-To

ENDORSEMENTS: Shellfish YES/NO NC individual residents only, no businesses

NC RESIDENCY: (Check one) ☐ Non-resident – less than 60 days ☐ 60 days – 6 months ☐ Over 6 months

State of Residency: ☐ Complete the *Certification of Eligibility for NC Residency*

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

Check One: Driver's License No. ☐	State I.D. No. ☐	Military I.D. No. ☐	Resident Alien I.D. No. ☐	Passport No. ☐
Number:	Expire Date:			
Date of Birth	Primary Residence (State)	E-Mail Address		
/ /				

Race:	Gender:	Physical Address	Mailing Address ☐ Check if same as physical address
	M / F		
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:
( ) -	( ) -	( ) -	( ) -

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

Type of Business Entity (circle one): Corporation Partnership Sole Proprietorship LLC

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 Check if same as physical address
	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 _____

Single Vessel Corporations Must Complete This Section With the Vessel Master's Information

Participant I.D.	First Name	Middle Name	Last Name	Suffix

Check One: Driver's License No. ☐	State I.D. No. ☐	Military I.D. No. ☐	Resident Alien I.D. No. ☐	Passport No. ☐
No.	Expire Date / /			

Date of Birth	Primary Residence	E-mail Address
/ /		

Race:	Gender:	Physical Address	Mailing Address Check if same as physical address
	M / F	Address 1:_____	Address 1:_____
Height	Weight	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:
( ) -	( ) -	( ) -	( ) -

PLEASE COMPLETE REQUIRED ECONOMIC SURVEY, VESSEL SURVEY, AND GEAR SURVEY SECTIONS

Economic Survey (must be completed by Responsible Party)

At least 50% of income derived from commercial fishing?

☐ YES ☐ NO

Signature:_____ Signature:_____

Transfer-To Signature Date Transfer-From Signature Date

Must be signed to be valid **Must be signed to be valid**

Certification Statement Form For Vessel Transfers

(Must be completed, signed, and notarized for each transfer application by the Transfer-To and Transfer-From Participants)

Certification Statement (This section must be completed by the **Transfer-From** Participant)

I, _____, certify that I have the authority to transfer this

license or registration currently issued in the name of _____ .

(circle one) *(list name printed on the license)*

Certification Statement (This section must be completed by the **Transfer-To** Participant)

I, _____, certify that:

1. All the information provided on this application and any supporting documentation provided is true, accurate, and complete.

2. 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.

3. 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.

4. I am a resident of the State of: _____

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

   ☐ I have been a legal resident for more than six months, or

   ☐ 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.

5. 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.

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:_____ Date Signed:_____

Signature of **Transfer-To**_____ Signature of **Transfer-From**_____

NOTARY (All new applications must be notarized)

State: _____

County:_____

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

Notary Public:_____My Commission expires:_____