



TOWN OF BOURNE
Department of Natural Resources
24 Perry Avenue - Room 102
Buzzards Bay, MA 02532-3441
<http://www.townofbourne.com>



Shellfish Constable, Marinas, Herring Agent, Harbor Master, Fish & Game Enforcement, Conservation Enforcement & More

COMMERCIAL SHELLFISH PERMIT APPLICATION

Requirements are specified in the Shellfish Regulations; read complete Regulations for all requirements that may pertain to your desired permit. If all requirements are met, complete this Application and submit with the appropriate payment (Payable to "Town of Bourne") to the Department, along with a copy of your Drivers License or State ID Card, and any supporting documentation specified in the Regulations, requested by the Department or indicated below, or that you feel may assist us in making a determination to approve your Application. The burden of any proof regarding eligibility and requirements rests solely with the Applicant. *** Complete all information and print clearly ***

TYPE OF PERMIT: _____ NEW: _____ RENEWAL: _____

NAME (FULL): _____

DATE OF BIRTH: _____ PLACE OF BIRTH: _____

LEGAL ADDRESS: _____

HOME PHONE: _____ OTHER PHONE: _____

EMAIL ADDRESS: _____

TIME AT ABOVE ADDRESS: _____

IF LESS THAN 1 YEAR, PREVIOUS ADDRESS: _____

*ATTACH LEGAL/NOTARIZED LEASE, IF RENTING – EXPIRATION DATE: _____

MAILING ADDRESS (If Different): _____

CURRENT/PREVIOUS TOWN PERMITS & DATES: _____

OTHER/PREVIOUS TOWNS & DATES PERMITTED IN: _____

LIST ANY DENIALS/VIOLATIONS IN ANY TOWN: _____

*ATTACH MA COMMERCIAL PERMIT – PERMIT #: _____ YEARS HELD: _____

PRIMARY OCCUPATION: _____

EMPLOYER/ADDRESS/PHONE: _____

*ATTACH PRIMARILY USED VEHICLE REGISTRATION – REG #: _____

VEHICLE MAKE: _____ VEHICLE MODEL: _____ VEHICLE COLOR: _____

* ATTACH BOAT REGISTRATION – MS/DOC #: _____

BOAT LENGTH: _____ BOAT COLOR: _____ BOAT TYPE: _____

ANY CHANGES IN THIS INFORMATION MUST BE REPORTED TO THE D.N.R. IMMEDIATELY!

COMMERCIAL CATCH REPORT
(For Previous Calendar Year)

	PIECES	PECKS	BUSHELS	POUNDS
CLAMS:	_____	_____	_____	_____
CONCHS:	_____	_____	_____	_____
EELS:	_____	_____	_____	_____
OYSTERS:	_____	_____	_____	_____
QUAHOGS: LITTLENECKS	_____	_____	_____	_____
CHERRYSTONES	_____	_____	_____	_____
CHOWDERS	_____	_____	_____	_____
{ QUAHOGS TOTAL:	_____	_____	_____	_____ }
SCALLOPS:	_____	_____	_____	_____

SURVEY
(Be As Specific As Possible)

In your opinion, what areas in Town have high contents of seed that should be protected: _____

In your opinion, what areas in Town are being "fished out" and are in need of propagation: _____

I, the undersigned and as named on Page 1, affirm that the information on Pages 1 & 2 of this Application is true, complete and correct and affix my signature hereto under the pains and penalties of perjury. By signing below, I agree to abide by the Shellfish Regulations and any other applicable rules and regulations of the Town of Bourne, as well as all applicable laws, rules and regulations of the Commonwealth of Massachusetts. I understand that perjury, misleading statements, or failure to abide by any laws, rules and regulations may result in permit denial, suspension, or revocation; without compensation or reimbursement, if suspended or revoked.

SIGNED: _____ EMPLOYEE: _____

If not signed in the presence of an employee of the Department of Natural Resources, this document must be signed in the presence of a Notary.

On this _____ day of the month of _____ in the year _____, before me personally appeared _____, to me known to be the person described in and who executed the foregoing to be true under the pains and penalties of perjury.

NOTARY PUBLIC MY COMMISSION EXPIRES: _____

FOR OFFICE USE ONLY: DATE: _____ APPROVED: _____ DENIED: _____

DIRECTOR: _____ PERMIT #: _____