

# NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

Division of Fish, Wildlife and Marine Resources, Bureau of Marine Resources

205 North Belle Mead Road, Suite 1, East Setauket, NY 11733

P: (631) 444-0430 | F: (631) 444-0434 | FW.Marine@dec.ny.gov

www.dec.ny.gov

## Food Fish and Crustacea Dealer and Shipper Permit Application

This is an electronic copy of a Food Fish and Crustacea Dealers and Shippers Permit Application package. Please print this package and complete the application, and mail or bring it to DEC Bureau of Marine Resources at the address above.

Your signature and the date are needed in two places:

1. Affirmation (Page 4)
2. Food Fish and Crustacea Dealers and Shippers License Reporting Status Form (Page 5)

### Please read the following so that you can ensure the successful processing of your application:

- Please be sure to completely fill out all the requested information on the application.
- New applicants (not a corporation) please include one recent photo (head only), passport size, in color, photo quality only. No hats or sunglasses in the photo.
- New corporate applicants should provide a copy of the Certificate of Incorporation, Articles of Organization, or Business Certificate with the permit application.
- If you are using a post office box to receive mail, please include a legal address (street address) with your application or it will be returned.

Please send checks or money orders made out to **NYSDEC** in the amount of **\$250.00**. Starter checks and credit cards are not accepted.



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NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

Marine Resources Headquarters, Marine Permit Office
205 North Belle Mead Road, Suite 1, East Setauket, NY 11733
P: (631) 444-0470 | F: (631) 444-0497 | FW.Marine@dec.ny.gov
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Year 2018

Application for Marine Permits

January 09, 2018

Corporation? Yes No

For Corporate Applicants, Are you a Corporation in Good Standing?

Yes No

NYS Domicile? Yes No

Applicant Name:

Mailing Address
Street:
City: State: Zip Code:
Country:

Home Address (If different)
Street:
City: State: Zip Code:
Country:

Other Address for Business or Facility Location
Street:
City: State: Zip Code:
Country:

Country Issuing Taxpayer Id:

Taxpayer ID/SSN:

Township:

County:

Home Phone:

Business Phone:

Fax Phone:

E-Mail:

Physical Description (N/A if Corporation)

Date of Birth:

Gender: Male Female

Hair Color:

Eye Color:

Height: Weight:

Permit Year 2018

Permit Fee: \$250.00

Permit Type: Food Fish and Crustacea Dealer and Shipper

Company Name:

Federal Dealer Permit? Yes No

Federal Permit Number

Contact Information

Role: Authorized Representative Business Phone: Home Phone:

First Name: Last Name:

Street: City: State: Zip:

Contact Information

Role: Corporate Officer Business Phone: Home Phone:

First Name: Last Name:

Street: City: State: Zip:

Contact Information

Role: Partner Business Phone: Home Phone:

First Name: Last Name:

Street: City: State: Zip:

Contact Information \_\_\_\_\_

Role: **Sole Owner** \_\_\_\_\_ Business Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Total Amount Due:** \_\_\_\_\_ \$250.00

**DECLARATION OF DOMICILE for New York State Resident Permits and Licenses:**

Pursuant to New York State law, I declare that I am domiciled within the State of New York and have maintained a fixed, permanent, and principal place of abode within the State of New York immediately prior to the time of filing this application and will continue to maintain such a place of abode for the duration of this permit and/or license. I understand that while I may have multiple residences, I can only have one true domicile.

If my domicile should change, I will notify the Department within seven business days. I understand that I must surrender my permit and/or license if I am no longer domiciled within the State of New York. I affirm and understand that should I fail to notify the Department within seven business days, the Department may immediately institute revocation proceedings pursuant to 6 NYCRR Part 175.

Applicant Signature **Not applicable** \_\_\_\_\_ Date \_\_\_\_\_

**AFFIRMATION:**

I hereby affirm under penalty of perjury that all of the information provided in this application and any applicable attachments provided to obtain this permit are true and accurate. I furthermore affirm that I am aware of and understand the applicable sections of the Environmental Conservation Law and the Official Compilations of Codes, Rules and Regulations of the State of New York. I understand that any violation of these laws and regulations may subject me to criminal and civil penalties including fine, imprisonment, revocation of license, or a combination of any of these penalties.

I affirm and understand that any false statement made herein is punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law and the offering of a false instrument for filing is punishable as a felony pursuant to Section 175.35 of the Penal Law.

→ Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Authorized Representative \_\_\_\_\_

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## FOOD FISH AND CRUSTACEA DEALERS AND SHIPPERS LICENSE REPORTING STATUS FORM 2018

All New York State Food Fish & Crustacea license holders **MUST** fulfill NYSDEC reporting requirements. This form will determine if you need to report to DEC.

<b>FF&amp;C Dealer/Shipper License No:</b>
<b>Name/Corporation Name on License:</b>
<b>FF&amp;C Dealer/Shipper Address:</b>
<b>City/State/Zip:</b>
<b>Phone No:</b>

### PLEASE INDICATE YOUR LICENSE OR PERMIT STATUS BY CHECKING THE APPROPRIATE BOX BELOW

<b>A</b>	<input type="checkbox"/> I hold a <u>FEDERAL seafood dealer permit</u> from National Marine Fisheries Service. You are not required to report to NYSDEC because you report directly to NMFS. Federal Dealer Permit # _____
<b>B</b>	<input type="checkbox"/> I <u>ONLY</u> hold a <u>NYS Dealer license</u> . I purchase seafood directly from harvesters in NYS. I do not hold a federal seafood dealer permit. You <b>MUST</b> submit reports to DEC. If you need information on reporting, please enter the address/email you would like the information sent to: <input style="width: 100%; height: 20px;" type="text"/>
<b>C</b>	<input type="checkbox"/> I <u>ONLY</u> hold a <u>NYS Dealer license</u> . I <u>make no purchases</u> directly from harvesters in NYS. By filling out and returning this form, you fulfill the reporting requirements for the year. If during the year, you make a purchase from a harvester in NYS, please contact the DEC at 631-444-0857 or fax 631-444-5621 for reporting procedures.

I hereby affirm under penalty of perjury that information provided on this form and all attachments submitted herewith is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law. I further affirm that I am aware of the applicable sections of the Environmental Conservation Law and Official Compilation of Codes, Rule and Regulations of the State of New York and fully understand them. I understand violation of these laws and regulations may subject me to criminal and civil penalties including fine imprisonment, revocation of license or a combination of any of these penalties.

\_\_\_\_\_

Print Name

Print Title

Authorized Signature

Date



Department of Environmental Conservation

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### Instructions for Completing the License/Permit Application

1. **NEW Application:** Please print all requested information in the appropriate spaces.
2. **RENEWAL Application:** Please review **ALL** pre-entered information. If any of the pre-entered information is incorrect, please cross it out and enter the correct information above it.
3. **SIGNATURE FOR AFFIRMATION:** Please sign and date the application or it will be returned.
4. **SOCIAL SECURITY NUMBER or FEDERAL TAX ID NUMBER:** Please enter on application or application may not be processed.
5. **NEW YORK STATE DOMICILE** – Please check the appropriate box (Yes or No) for New York State Domicile or the application will be returned. ***If you are domiciled in New York, you must also sign and date the Declaration of Domicile on the application or it will be returned.*** In order to qualify for a resident license or permit, a person must be domiciled in the State of New York immediately prior to filing the application and continue to maintain such status for the duration of the permit or license. The domicile for minors is the domicile of their parent(s) or legal guardian(s).
6. **CORPORATIONS, BUSINESSES AND DBA's** – If purchasing a license or permit in the name of a business (domestic corporation, domestic limited liability company, foreign business corporation, foreign LLC) or under an assumed name (DBA), please submit a copy of the legal documents establishing the corporation, LLC or DBA to DEC with the completed application form. Valid copies of the above referenced documents (Certificate of Incorporation, Articles of Organization (LLC), Filing Receipt for Application of Authority for Foreign Businesses Operating in New York, or Certificate of Assumed Name (DBA)) must be provided to DEC when filing a new application or each year with your renewal. Please refer to the New York State Department of State's website for more information on obtaining copies of these documents: [www.dos.state.ny/corps/](http://www.dos.state.ny/corps/).
7. **SUPPLEMENTARY DOCUMENTS:** Please be sure to include any supplementary forms needed for your application. You may need to also include copies of your driver's license for proof of domicile, a boat registration or USCG documentation or your captain's license.
8. **PERMIT FEE:** Please make remittance payable to **NYSDEC**. **ALL** applications submitted by mail must be paid by check or money order. **Applicants from Canada must** contact the Marine Permit Office to determine acceptable forms of payment for application fees. **NOTE: There will be a \$20.00 fee for all returned checks.**
9. **PHOTOGRAPH:** Please submit with your application a recent, clear passport size photograph of yourself, approximately 1 ½ x 2 inches. A photograph is not required for corporate and business applications. A photograph is not required if you are renewing from the preceding year.
10. **FINISHED?** Mail the application, any required documents, the correct permit fee, and photograph to the address above for the NYSDEC's Marine Permit Office.

# MARINE PERMIT RENEWALS

## Information for Business Applicants



Department of  
Environmental  
Conservation

### Here are the steps to find and print information concerning a business from the DOS *Corporation and Business Entity Database*.

1. **Go to The Department of State Homepage:** [www.dos.ny.gov](http://www.dos.ny.gov) .
2. Select 'Businesses', and choose 'Business Search' from the drop-down menu. You should see the "Department of State Division of Corporations, Search Our Corporation and Business Entity Database" screen.  
It is important that you correctly enter all the required information into the database fields.
3. For now, skip the '**Entity Name**'. This is where you will later enter the business name being searched for.
4. In the '**Name Type**' box, select "All."
5. In the '**Search Type**' box, you will choose how to search for the business name.
  - For best results, we recommend you choose "Contains" or "Partial."
6. Now return to the '**Entity Name**' box. Enter the name of your business as it was filed with the Department of State. You do not have to enter the whole name, but make sure you entered at least one word from the business name in the '**Entity Name**' box.
7. In the '**Captcha**' box, you must enter the numbers you see in the blue box for the search to function correctly.
8. Click on the "Search the Database" button.
  - The DOS database search will return with the name of your business and maybe other businesses with a similar name. When you find your business name, click it. You will be directed to a page with your business's information. Please check to ensure you found the correct business and that the information is correct.
9. **Please print this page.** Please include this printed page with your renewal application. Please remember this document must be dated no earlier than 30 days before you submit your renewal application to the DEC Marine Permit Office.

**NOTE:** If your business name does not appear, please ensure you typed the entries correctly.

You may have to modify the wording in the '**Entity Name**' box to get a correct search result. For example, if your company name is LONG ISLAND BLUEFISH, you may search for LONG ISLAND, LONG ISLAND BLUE, ISLAND BLUE or BLUEFISH using the '**Search Types**' "Partial" or "Contains."

If you have any difficulties, please contact the Marine Permit Office at 631-444-0470 or at [MPO@dec.ny.gov](mailto:MPO@dec.ny.gov)

#### CONTACT INFORMATION

##### Marine Permit Office

Division of Marine Resources

##### New York State Department of Environmental Conservation

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NYSDEC/DMR/MPO 01/2018

For more information, or to sign-up for email updates from NYSDEC, visit our website:

[www.dec.ny.gov](http://www.dec.ny.gov)