

LICENSE DURATION  
1 Year  
(Jan 1 – Dec 1)

# Fishing Preserve License

Application

LICENSE FEE \$50.<sup>00</sup>

For more information on this license visit [www.dec.ny.gov/permits/25005.html](http://www.dec.ny.gov/permits/25005.html)

For Office Use Only

License # \_\_\_\_\_

Effective Date \_\_\_\_\_

Check# \_\_\_\_\_

M.O. # \_\_\_\_\_

**\*APPLICANT INFORMATION**

name / date of birth

\_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_ DOB (mm/dd/yyyy) \_\_\_\_\_

address

\_\_\_\_\_ Street Address \_\_\_\_\_ Apartment/Unit \_\_\_\_\_ City \_\_\_\_\_

\_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

email / telephone

\_\_\_\_\_ Email \_\_\_\_\_ Telephone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**\*FACILITY LOCATION** (Location and details of the preserve)

address

\_\_\_\_\_ Street Address \_\_\_\_\_ Apartment/Unit \_\_\_\_\_ City \_\_\_\_\_

\_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Facility Telephone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

number of ponds

total surface area of pond(s) acres

Identify the fish species you intend to stock and the source from which you will acquire the fish

SPECIES	SOURCE

**\*PUBLIC CONTACT LIST INFORMATION** (Complete this section to be included in the contact list provided to the public)

preserve email / telephone

\_\_\_\_\_ Preserve Email \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Preserve Telephone

**REQUIRED DOCUMENT(S)**

(must be submitted with your application)

- Check or money order for the appropriate license fee made payable to: "NYS Department of Environmental Conservation"
- Map depicting the location/pond to be licensed (Example maps: topographic, road/highway, etc.)

**APPLICATION CHECKLIST**

(before sending this application, please verify the following)

- All application fields/sections marked with an asterisk ( \* ) are complete
- You signed and dated below

**By signing below, I understand that this license is for use on a privately-owned artificial or man-made waterbody only.**

**\*NOTICE:** Pursuant to ECL Section 3-0301(2)(Q), false statements made on this application are punishable in accordance to Section 210.45 of the New York State Penal Law.

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

**MAIL YOUR COMPLETED APPLICATION AND REQUIRED DOCUMENT(S) TO:**

NYS Department of Environmental Conservation  
Special Licenses Unit · 5th Floor  
625 Broadway, Albany, New York 12233

For questions or concerns, please contact us  
Phone: (518) 402-8985 · Fax: (518) 402-8925  
Email: [SpecialLicenses@dec.ny.gov](mailto:SpecialLicenses@dec.ny.gov)  
Website: [www.dec.ny.gov/63.html](http://www.dec.ny.gov/63.html)

Please allow 45 days for DEC to review and process your application.

<sup>1</sup>Incomplete or vague applications will be returned and delay the processing of your permit.