ALL INCOMPLETE APPLICATIONS WILL BE RETURNED

Florida Fish and Wildlife Conservation Commission

P.O. Box 6150 Tallahassee, FL 32314-6150
(850)488-0331

Application for
HS-213 **HAUL SEINE GEAR LICENSE.....$100.00 Fee**

New Applicant_____

Licensee Name_____

Mailing Address_____ City_____ State___ Zip_____
*Facility Address_____ City_____ State___ Zip_____
*If address is a rural route, provide directions on reverse.

Business Phone: (___) ___-_____ County Of Residence:_____

GEAR INFORMATION

Length of Gear:_____

Current Permit Number (if applicable):_____

Commercial License Number (if applicable):_____

The information provided is true and correct. I agree to comply with the appropriate Florida Statutes and the regulations of the Commission.

_____ (___)_____ _____
Applicant's Name(Please Print) ***Home Phone*** ***Applicant's Signature/Date***

Date of Birth_____**Social Security**_____**Height**___**Weight**___**Hair**___**Sex**___**Race**____

FOR COMMISSION USE ONLY

Approved L/E :_____ Date_____
Approved Fish:_____ Date_____
Denied:_____ Date_____
Reason:_____
Revised 12/00 **VALID FOR 12 MONTHS**

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