



Maine Department of Inland Fisheries and Wildlife
353 Water Street, 41 SHS, Augusta, ME 04333
Phone 207-287-8000 / Fax 207-287-9037

APPLICATION FOR BAIT RETAIL LICENSE

In accordance with the provisions of the Revised States, Title 12, Section 12551-A (5) Baitfish Wholesaler's License

New Applicant _____ (1719) Renewal Applicant _____ (1719) Last Year Licensed: _____ **Annual Fee \$16**

Name: _____
First Name Last Name MI

Date of Birth: _____ Gender: _____ MOSES ID Number: _____

Eyes: _____ Height: _____ Hair: _____ Weight: _____ Social Security #: _____
(NEW Applicants Only)

Mailing Address: _____
Street or PO Box Town State ZIP

Physical Address: _____
Street Town State ZIP

Email Address: _____ Phone: _____

Driver's License Number: _____ Driver's License State: _____

Are you retailing Baitfish under this license? (Required – Check one) YES NO

If yes, please list retail address: _____
Street Town

This license permits the selling of live smelt and baitfish from ONE location. If a person intends to sell from more than one location, each location must be licensed separately by obtaining an additional Live Bait Retailer's license.

Applicant Signature: _____ **Date:** _____

SEND APPLICATION WITH THE APPROPRIATE FEE:

Make check payable to: Treasurer, State of Maine

Department of Inland Fisheries and Wildlife
Licensing Division
 353 Water Street, 41 SHS
 Augusta, ME 04330

CREDIT CARD PAYMENT

All Major Credit Cards Accepted

Name on Card: _____

Card #: _____

Expiration Date: ____ / ____ **Code:** _____

Billing Address: _____
