

**Florida Fish & Wildlife Conservation Commission**

**2011-2012 Commercial Saltwater Retail and/or Wholesale Dealer License Application**

Commercial Saltwater Licenses and Permits • P.O. Box 6150 • Tallahassee, FL 32314-6150 • (850) 487-3122 (850) 487-2065 Fax

**(All licenses expire June 30, 2012) Licenses are Non-Transferable and Non-Refundable**

<b>A P P L I C A N T</b>	Applicant Name		Last		First		MI	Suffix (Jr, Sr, III, etc)	
	Date of Birth	Month	Day	Year	Social Security Number	Are you a Florida Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you a US Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Company Name		Business Name as filed with Florida Secretary of State						
	Federal Employee Identification	FEID #			Fictitious Name Registration #	Are you a Florida Corporation? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Date of Birth		Gender (circle one)		Ethnicity		Male / Female African American/White/Hispanic			

<b>A D D R E S S</b>	Mailing Address— <i>Must be completed!</i>		Number and Street or P.O. Box			City		
	State	Zip Code	County	Country, if not the USA				
	Primary Phone #	( ) -	Alternate Phone #	( ) -	Fax #	( ) -		
	E-mail Address	Florida Drivers License #						

<b>D E F I N I T I O N S</b>	<b>Retail Dealer</b>	Any person, firm, or corporation which sells saltwater products directly to the consumer, but no license is required of a dealer in merchandise who deals in or sells saltwater products consumed on the premises or prepared for immediate consumption and sold to be taken out of any restaurant licensed by the Division of Hotels and Restaurants of the Department of Business Regulation. <b>Retail Dealers may not purchase product directly from the harvester and may not transport/sell saltwater products without invoice or bills of lading from the Florida wholesale dealer the product was purchased from.</b>
	<b>Wholesale County Dealer</b>	Any person, firm, or corporation which <u>sells or transports</u> saltwater products to any person, firm, or corporation except to the consumer and <b>who may buy saltwater products in the county designated</b> on the wholesale license from any person licensed pursuant to section 379.362, F.S., or from any licensed Florida wholesale dealer. <b>If county designation field is left blank, county of residence will be issued on license.</b>
	<b>Wholesale State Dealer</b>	Any person, firm, or corporation which <u>sells or transports</u> saltwater products to any person, firm, or corporation except to the consumer and who may buy saltwater products in any county of the state for any person licensed pursuant to section 379.362, F.S., or from any licensed Florida wholesale dealer.
	<b>Resident (includes Resident Alien)</b>	<ul style="list-style-type: none"> <li>A person who has continuously resided in the state of Florida for a period of one year preceding the application for license.</li> <li>Resident Alien—A person who has continuously resided in the state of Florida for at least 1 year <b>and</b> can provide documentation of permanent residency status from the Immigration and Naturalization Service.</li> </ul>
	<b>Non-Resident (includes Non-Resident Alien)</b>	<ul style="list-style-type: none"> <li>A person who <u>has not</u> continuously resided in the state of Florida for a period of one year preceding the application for license.</li> <li>Non-Resident Alien—A person who has not resided in the state of Florida for at least 1 year <b>and</b> can provide documentation of permanent residency status from the Immigration and Naturalization Service.</li> </ul>
	<b>Alien</b>	A person who <u>does not</u> have documentation from Immigration and Naturalization Service showing permanent residency in the United States.
	<b>FEID</b>	In accordance with the provisions of Section 119.092, F.S., each state agency which registers or licenses corporations, partnerships, or other business entities shall include within its numbering system, the Federal Employer's Identification Number. If you have no employees, the Social Security Number of the applicant is requested.
	<b>Alien Corporation</b>	Foreign corporation; a corporation formed outside of the United States.
	<b>Non-Resident Corporation</b>	A corporation formed in a state other than Florida, even though authorized by the Department of State to do business in Florida.
<b>Resident Corporation</b>	A corporation formed under Florida Statutes and carries active files with the Department of State.	

**Affidavit Section - The affiant must be the individual who is responsible for the management of the business. This section must be completed.**

<b>A F F I D A V I T S E C T I O N</b>	Full Legal Name		Last		First		MI	Suffix (Jr, Sr, III, etc)
	Date of Birth	Month	Day	Year	Social Security #	Place of Birth		
	<b>List any citations</b> you have received during the past three-year period (if new applicant) or previous license year (if renewal dealer), either from the Bureau of Law Enforcement or any other law enforcement agency (excluding traffic offenses): Attach an additional page if you need more space for citations. <b>If you have not received any citations as described, circle "None Received".</b> <span style="float: right;"><b>NONE RECEIVED</b></span>							
	Date of Citation:				Date of Citation:			
	Charge:				Charge:			
	Court Disposition:				Court Disposition:			
	<b>Notice:</b> Under penalty of perjury, I declare that I have read and understand contents of the document and the facts stated are true. I pledge myself to the faithful observance of all laws and lawful regulations of the state regulating the conservation, dealing in, taking, selling, transporting and/or possession of fish, seafood and other saltwater products, and cooperation in the enforcement of all such laws to every reasonable extent. Chapter 837.06, Florida Statutes provides that whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his or her official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in s. 775.082 or 775.083, Florida Statutes. When this application is received by a state agency, this information becomes public record subject to inspection under provisions of Chapter 119, Florida Statutes. <b>Failure to provide accurate or complete information will be basis for license denial.</b>							
	Signature of Applicant		Title (if applicable)/Occupation				Date of Application	

**INSTRUCTIONS**

- 1 If a business name is used, you **must** be registered with the Florida Secretary of State as a Fictitious Business or an active Corporation.
- 2 PRINT or TYPE all requested information. NA=Not Applicable
- 3 Resident Aliens must attach a copy of their "Green Card" showing Permanent Resident Status.
- 4 Write in your license number in the space(s) provided if you have held a previous year's license.
- 5 Attach your check or money order (NO CASH) made payable to **FWC** (for the total amount due.)
- 6 Sign and date the application and enter your business title, if applicable. (e.g., Owner, Secretary, etc.). Application will not be processed without signature.
- 7 **Mail to the PO Box address shown at the top of this application.**
- 8 License year runs from July 1<sup>st</sup> through June 30<sup>th</sup> of the following year. **Fees cannot be prorated for partial year licenses. Licenses are non-refundable.**
- 9 Before retailing product intended for human consumption, you are required to contact the Department of Agriculture and Consumer Services, Division of Food Safety, 3125 Conner Blvd, Room 281, Tallahassee, FL 32399-1650, (850) 245-5520, for additional requirements.

**RETAIL DEALER**

<b>Check <input checked="" type="checkbox"/> one of the following:</b>		<input type="checkbox"/> <b>Renewal RC #</b>		<input type="checkbox"/> <b>New</b> —A new Retail Dealer-Central License # will be assigned	
<b>Retail Dealer-Central License</b>		<b>License Fee</b>		<b>Amount Enclosed</b>	
<input type="checkbox"/> Resident		\$ 75.00		<b>\$ _____ .00</b>	
<input type="checkbox"/> Non-Resident		\$ 250.00			
<input type="checkbox"/> Alien		\$ 300.00			
Business Address (Physical Location)	Number and Street			City	
	State	Zip Code	County	Business Phone	( ) -
If Mobile Unit, provide the following:		Year	Make	Tag Number	
<b>Check <input checked="" type="checkbox"/> one of the following:</b>		<input type="checkbox"/> <b>Renewal RO #</b>		<input type="checkbox"/> <b>New</b> —A new Retail-Other Location License # will be assigned	
<b>Retail-Other Location License</b>		<b>License Fee</b>		<b>Amount</b>	
<input type="checkbox"/> Resident		\$ 25.00		<b>\$ _____ .00</b>	
<input type="checkbox"/> Non-Resident		\$ 40.00			
<input type="checkbox"/> Alien		\$ 65.00			
Business Address (Physical Location)	Number and Street			City	
	State	Zip Code	County	Business Phone	( ) -
If Mobile Unit, provide the following:		Year	Make	Tag Number	

**WHOLESALE DEALER**

<b>Check <input checked="" type="checkbox"/> one of the following:</b>		<input type="checkbox"/> <b>Renewal WD #</b>		<input type="checkbox"/> <b>New</b> —A new Wholesale Dealer's License # will be assigned	
<b>Specify County:</b>		Note: County Restriction applies only when purchasing products directly from fishermen.			
<b>County Wholesale Dealer's License</b>		<b>License Fee</b>		<b>Amount</b>	
<input type="checkbox"/> County Resident		\$ 400.00		<b>\$ _____ .00</b>	
<input type="checkbox"/> County Non-Resident		\$ 600.00			
<input type="checkbox"/> County Alien		\$ 1,100.00			
<b>Statewide Wholesale Dealer's License</b>		<b>License Fee</b>		<b>Amount</b>	
<b>Note:</b> A Statewide Wholesale Dealer's License is required to purchase from fisherman in more than one county.					
<input type="checkbox"/> Statewide Resident		\$ 550.00		<b>\$ _____ .00</b>	
<input type="checkbox"/> Statewide Non-Resident		\$ 1,100.00			
<input type="checkbox"/> Statewide Alien		\$ 1,600.00			
<b>Special Note:</b> Every wholesale dealer who intends to operate in more than one location under a single Wholesale Dealer License must provide, along with his/her application, a list of such street addresses. <b>You must complete the Wholesale Dealer Application-Affidavit Section on reverse side.</b>					
Business Address	Number and Street			City	
	State	Zip Code	County	Business Phone	( ) -
If Mobile Unit, provide the following:		Year	Make	Tag Number	

<b>TOTAL AMOUNT ENCLOSED™</b>	<b>\$ _____ .00</b>
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