

ALL INCOMPLETE APPLICATIONS WILL BE RETURNED

# Florida Fish and Wildlife Conservation Commission

P.O. Box 6150, Tallahassee, FL 32314-6150  
(850) 488-3641

Application for  
FP-214 PRIVATE FISH POND LICENSE. . . . . \$3.00 PER ACRE \$ \_\_\_\_\_

New Applicant \_\_\_\_\_

Licensee Name \_\_\_\_\_ E-mail address \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Facility Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Size of the Pond: \_\_\_\_\_ acres. Must be at least 20 acres.  
(Submit separate applications for each pond)

Name of the Pond: \_\_\_\_\_

Exact Location of the Pond:

County: \_\_\_\_\_ Section: \_\_\_\_\_ Range: \_\_\_\_\_ Township: \_\_\_\_\_

\*Give direction to pond from nearest federal or state road on reverse.

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

\_\_\_\_\_  
Owner's Name (Please Print) Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Owner's Signature/Date

Date of Birth \_\_\_\_\_ \*Social Security \_\_\_\_\_ Height \_\_\_\_\_ Sex \_\_\_\_\_ Race \_\_\_\_\_

FOR COMMISSION USE ONLY / FISHERIES

Number of Acres: \_\_\_\_\_  
Inspected By: \_\_\_\_\_ Date \_\_\_\_\_  
Approved: \_\_\_\_\_ Date \_\_\_\_\_  
Denied: \_\_\_\_\_ Date \_\_\_\_\_  
Reason: \_\_\_\_\_

Revised 04/12 **VALID FOR 12 MONTHS**

\*The Florida Fish and Wildlife Conservation Commission (FWC) collects social security number (SSN) for the issuance of recreational and professional wildlife, fishing or hunting licenses or permits to an individual in accordance with s. 379.352 F.S. and 42 USC 666 for the purposes of administration of the Title IV-D program for child support enforcement, use by the commission, and as otherwise provided by law.