



N.H. FISH & GAME DEPARTMENT
 Region 3, 225 Main St.
 Durham, NH 03824-4723
 (603) 868-1095

Permit No. _____

New Hampshire Coastal/Estuarine Waters Harvest Application/Permit

Complete and Return to: New Hampshire Fish and Game, Region 3, 225 Main St., Durham, NH 03824-4732. Please Print in Ink. All applications must be complete or will be returned. The Executive Director may, however, request additional clarification on any permit application. A permit is required by the person responsible for the fishing gear on the days in which the gear is operated.

Under the requirements of Fis 609.01, application is hereby made to harvest finfish, horseshoe crabs and American eels from coastal and estuarine waters of New Hampshire.

Permittee Information:

Name of Applicant _____
(Last Name) (Suffix) (First Name) (Middle Initial) (Maiden name if applicable)

Date of Birth _____ Height _____ Weight _____ Hair _____ Eyes _____

Street Address _____
(No.) (Street) (City) (State) (Zip)

Mailing Address _____
(If different from above) (City) (State) (Zip)

Home Telephone _____ Cell Phone _____ Email _____
(optional) (optional)

Vessel/Boat Information:

Vessel Owner (if not same as above): _____ Crew Size _____ State of Registration _____

Last Name _____ First Name _____ MI _____ Vessel Name _____ State Registration # or Coast Guard # _____

Street Address of Owner _____ National Marine Fisheries Federal Permit # _____ Principal Port _____

City _____ State _____ Zip _____ Country _____ Hull ID # _____ Hull Construction Material _____

Vessel Length: _____ Year Built: _____ Gross Tons**: _____ Net Tons**: _____ Horsepower**: _____ Hold Capacity (in Tons)**: _____

**Complete for Federal Documented Vessels Only.

Activity Information: *Check months to be fished. Reporting will be required and permit will be valid ONLY during checked months.*

January February March April May June
 July August September October November December

Fishing Information: (Check all gear to be used during the entire year.)

Method (see back)	# each	Size (see back)	Locations (list all)	Species Sought (list all)
___ Bow Net				
___ Gill Net (length/height/mesh)				
___ Weir				
___ Dip Net (Diameter of rim/depth/mesh)				
___ Other (specify on back)				
___ Other (specify on back)				

THIS SECTION MUST BE SIGNED BY ALL PERMIT HOLDERS

I hereby certify that the above information is true and correct. (Permittee subject to the penalties for making unsworn false statements under RSA 641:3).

(Signature) (Date)

Do not write in this box. Authorized by Executive Director (signature):

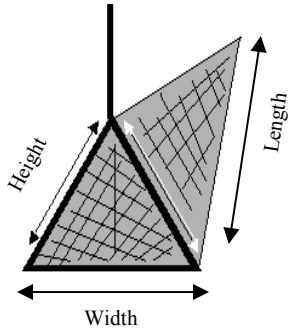
Date of Issue _____ Expires _____

Time of Issue _____

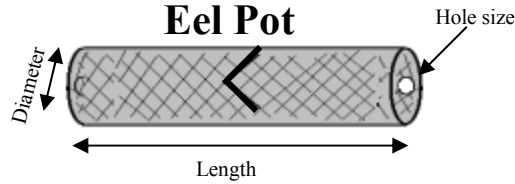
Revised 01/20/2009

Measurements needed for type of harvest gear. Include mesh size for all.

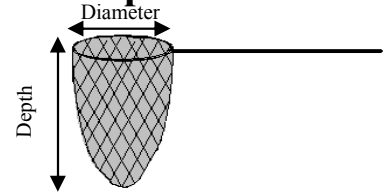
Bow Net



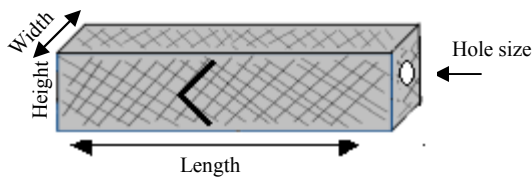
Eel Pot



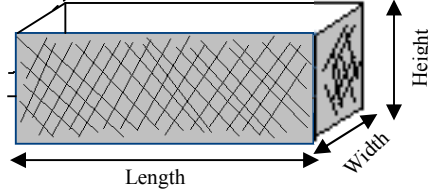
Dip Net



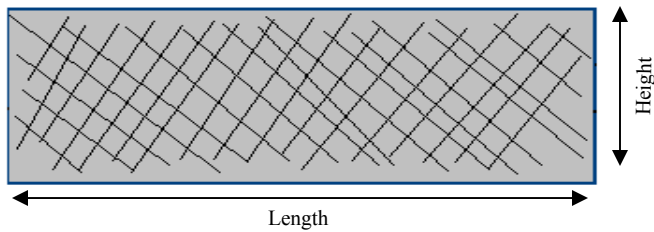
Minnow/Bait/Fish Trap



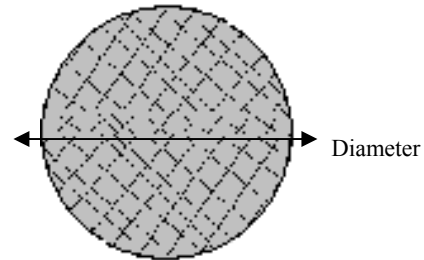
Wire Basket



Gill Net or Seine



Cast Net



Description if other than above: (measurements are needed)
