

Delaware Division of Fish & Wildlife



Charter Boat or Head Boat License Application

This is an application for a:

- Resident Head Boat\$300.00
- Non-Resident Head Boat\$600.00
- Resident Charter Boat\$150.00
- Non-Resident Charter Boat\$300.00

Vessel Owner Last Name _____

Vessel Owner First Name _____

Vessel Owner Middle Name _____

Vessel Owner Address _____

Vessel Owner Address2 _____

Vessel Owner City _____

Vessel Owner State _____

Vessel Owner Zip code _____

Vessel Owner Phone Number _____

Vessel Owner Drivers License Number _____ **Must attach copy**

Vessel Owner Social Security Number ____ - ____ - ____

Vessel Owner Date of Birth _____

Vessel Owner Captain's License _____ **Must attach copy**

If the owner is not a licensed captain, the primary captain of the vessel must submit the Captain's license.

Boat Registration or Documentation Number _____ **Must attach copy**

Must be valid and registered or documented for Commercial Passenger use.

Company Name (if applicable) _____

Vessel Owner EI Number (if applicable) _____

Boat Name _____ Boat Length _____

Boat Capacity (Passengers) _____ Home Port or Area of Operation _____

Signature of Owner

Amount Enclosed

(Check Payable to Division of Fish & Wildlife)

If you wish to pay by Credit Cards, please circle appropriate card type



Card Number _____ 3-digit card code _____ Exp. Date _____

Signature _____ Date: _____

Mail To: Danielle Davis
Division of Fish & Wildlife
89 Kings Highway
Dover, DE 19901

Questions? (302) 739-9918
Email to: DFWreclic@delaware.gov
Fax to: 302-736-7925 call when faxing

Please allow up to 4 weeks for processing.

If **Primary** operator is different from vessel owner, complete the following or indicate NONE:

Operator 1 Last Name _____

Operator 1 First Name _____

Operator 1 Address _____

Operator 1 Address2 _____

Operator 1 City _____

Operator 1 State _____

Operator 1 Zip code _____

Operator1 Phone Number _____

Operator 2 Last Name _____

Operator 2 First Name _____

Operator 2 Address _____

Operator 2 Address2 _____

Operator 2 City _____

Operator 2 State _____

Operator 2 Zip code _____

Operator 2 Phone Number _____

Operator 3 Last Name _____

Operator 3 First Name _____

Operator 3 Address _____

Operator 3 Address2 _____

Operator 3 City _____

Operator 3 State _____

Operator 3 Zip code _____

Operator 3 Phone Number _____

Operator 4 Last Name _____

Operator 4 First Name _____

Operator 4 Address _____

Operator 4 Address2 _____

Operator 4 City _____

Operator 4 State _____

Operator 4 Zip code _____

Operator 4 Phone Number _____

Operator 5 Last Name _____

Operator 5 First Name _____

Operator 5 Address _____

Operator 5 Address2 _____

Operator 5 City _____

Operator 5 State _____

Operator 5 Zip code _____

Operator 5 Phone Number _____