



DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES
 MARINE RESOURCES DIVISION



DISABLED SALTWATER FISHING
 THREE DAY EVENT LICENSE
 VESSEL REGISTRATION

VESSEL INFORMATION: *All information is required.*

	Registration Number or Documentation Number	Name
Vessel Number 1:	_____	_____
Vessel Number 2:	_____	_____
Vessel Number 3:	_____	_____
Vessel Number 4:	_____	_____
Vessel Number 5:	_____	_____
Vessel Number 6:	_____	_____
Vessel Number 7:	_____	_____
Vessel Number 8:	_____	_____
Vessel Number 9:	_____	_____
Vessel Number 10:	_____	_____
Vessel Number 11:	_____	_____
Vessel Number 12:	_____	_____
Vessel Number 13:	_____	_____
Vessel Number 14:	_____	_____
Vessel Number 15:	_____	_____