

Attachment B. Application for Commercial Shellfish License Statement of Domicile:

Fee: Res. \$402

\$2 over 65-Complimentary License

Date: _____ Town License # _____

1. **Name:** _____

2. Home Address: _____

3. Phone Number: _____

4. Mailing Address: _____

5. Address of Motor Vehicle Registration: _____

6. Voter Registration Address: _____

7. Where is your Permanent Address? _____

8. Social Security Number: _____

9. Name of Landlord or Mortgagor: _____

10. Copies of Rent Receipts or mortgage payments for Previous 3 Months:
(Yes/No) _____.

11. Place of Birth: _____ 12. Date of Birth _____

13. Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____

14. **State Claming License Number:** _____ **ME Driver's Lic #** _____

I AFFIRM THAT I AM DOMICILED IN THE TOWN OF _____
AND THAT I DISAVOW ALL CLAIMS AND PRIVILEGES OF DOMICILE IN ANY OTHER
COMMUNITY IN OR OUT OF THE STATE OF MAINE.

SIGNATURE OF APPLICANT: _____ **Date:** _____

Witness: _____

Personally appeared the above named _____
and swore that the statements contained herein are true to the best of the applicants knowledge and
information.

Notary Public _____

Article 3 Special Town Meeting May 25, 2000; adopted as amended
Amended May 7, 2001 to add Town of Southport
Amended May 5, 2003, Article 35, no expiration date on ordinance
Amended May 4, 2009 , Article 13 – no recreational license (with State Com license)