FEE: <u>10.00 + 2.00</u>

LICENSE # _____

Residents of Boothbay, Boothbay Harbor, Edgecomb, and Southport

TOWN OF BOOTHBAY, MAINE

Resident Recreational Clam License Application

Name: _			
Address: _			
_			
	Resident Town		
Boothbay	Boothbay Harbor	_EdgecombSouthp	ort
Height:	Weight:	Date of Birth:	
Social Secui	rity Number:		
Driver's License Number:		State	
Telephone:_		_ Date:	
Signature:			