

**NOTICE OF INTENT APPLICATION FOR A
RESIDENT COMMERCIAL SHELLFISH LICENSE
FOR THE TOWN OF BRUNSWICK**

CLASS

**FOR OFFICE USE
ONLY**

BRUNSWICK CODE: CHAPTER 11, ARTICLE 3, DIVISION 4, SECTION 11-131 TO 11-160

Please Print

Date ____/____/____

1. Name _____

2. Home Address _____

3. Mailing Address _____

4. Tel. #: _____ 5. Date of Birth ____/____/____ 6. Height _____ 7. Weight _____

8. Eye Color _____ 9. Hair Color _____

10. Place of Birth _____ 11. How long have you lived at the above address? _____

12. List all the places that you have lived in the past three years and when you lived there:

13. What is the nature of your residence in Brunswick?

- | | | |
|---|-------------------------|------------------|
| a. () Home owned by you. | b. () Rental Home | c. () Apartment |
| d. () Motel/Hotel | e. () Barracks or dorm | f. () Other |
| g. () Friend's residence (Give information in space below) | | |

14. Landlord's or Roommate Information:

Name: _____ Address: _____ Tel. #: _____

PLEASE STOP - TO BE COMPLETED IN THE PRESENCE OF THE TOWN CLERK:

I, _____ (Applicant's Name--please print) affirm that I am a resident of the Town of Brunswick and that I deny all claims and privileges for residence in any other community in OR out of the State of Maine. I am applying for a Resident Commercial Shellfish License at the cost of \$300.00

Applicant's signature: _____

Witnessed by: _____ (BRUNSWICK TOWN CLERK)

*******(For Town Clerk's Use Only)*******

Identification: (1) _____

(2) _____

Brunswick License #: _____ Fee paid: _____ Date: _____

First Change of Address:

Date: _____

Name: _____

Residence Address: _____

Mailing Address: _____

1st ID: _____

2nd ID: _____

Approved: yes no (please circle one) Clerk's initials: _____

Notified Marine Warden: yes no (please circle one) Clerk's initials: _____

Second Change of Address:

Date: _____

Name: _____

Residence Address: _____

Mailing Address: _____

1st ID: _____

2nd ID: _____

Approved: yes no (please circle one) Clerk's initials: _____

Notified Marine Warden: yes no (please circle one) Clerk's initials: _____

Third Change of Address:

Date: _____

Name: _____

Residence Address: _____

Mailing Address: _____

1st ID: _____

2nd ID: _____

Approved: yes no (please circle one) Clerk's initials: _____

Notified Marine Warden: yes no (please circle one) Clerk's initials: _____