

**REQUEST FORM TO CHANGE BOAT, CAPTAIN, TRUCK, LOADING/UNLOADING AREA ON DEPARTMENT OF AGRICULTURE SHELLSTOCK SHIPPER OR TRANSPLANT/RELAY LICENSE.**

PLEASE **ADD/REMOVE (CIRCLE ONE)** THE FOLLOWING BOAT, CAPTAIN, TRUCK, LOADING OR UNLOADING AREA TO MY DA/BA SHELLSTOCK SHIPPER, SHORT TERM RELAY OR LONG TERM RELAY LICENSE (CIRCLE ONE). LICENSE # CT \_\_\_\_\_

BOATS AND TRUCKS MUST BE INSPECTED BY DA/BA PRIOR TO ADDING TO SHELLSTOCK SHIPPER LICENSE. ONLY COMPLETE THE SECTION(S) THAT YOU ARE REQUESTING CHANGES TO YOUR CURRENT LICENSE.

**BOAT OR CAPTAIN CHANGE:**

1. Name: \_\_\_\_\_ Registration No. : \_\_\_\_\_  
 Color: \_\_\_\_\_ Size: \_\_\_\_\_ Make: \_\_\_\_\_  
 Marinehead with discharge: \_\_\_\_ YES \_\_\_\_ NO Documented No.: \_\_\_\_\_  
 Captain: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Owner/Other Information \_\_\_\_\_  
 Recent photo provided \_\_\_\_ YES \_\_\_\_ NO DA/BA Boat Inspection Date: \_\_\_\_\_

2. Name: \_\_\_\_\_ Registration No. : \_\_\_\_\_  
 Color: \_\_\_\_\_ Size: \_\_\_\_\_ Make: \_\_\_\_\_  
 Marinehead with discharge: \_\_\_\_ YES \_\_\_\_ NO Documented No.: \_\_\_\_\_  
 Captain: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Owner/Other Information \_\_\_\_\_  
 Recent photo provided \_\_\_\_ YES \_\_\_\_ NO DA/BA Boat Inspection Date: \_\_\_\_\_

**ALL TRUCK OR LOADING & UNLOADING AREA CHANGES FOR HARVEST LICENSE:**

1. Name of Individual/Company transporting shellfish listed in part 1 of license \_\_\_\_\_ (DOB) \_\_\_\_\_
2. Vehicle to be used for transporting shellfish \_\_\_\_\_  
(Year, Make, Color Marker #)
3. Enclosed storage area \_\_\_\_ YES \_\_\_\_ NO
4. DA.BA truck inspection date: \_\_\_\_\_

**The following must be completed for addition to short term & long term relay licenses. Not Applicable to hard clams.**

1. Location of Landing/Unloading dock for oyster seed less than 2 " : \_\_\_\_\_
2. Destination location of shellfish transported: \_\_\_\_\_

NAME (PRINT) \_\_\_\_\_ SIGNATURE \_\_\_\_\_

COMPANY NAME \_\_\_\_\_

DATE: \_\_\_\_\_