

NON-RESIDENT
NON-COMMERCIAL SHELLFISH PERMIT APPLICATION
TOWN OF SOUTHOLD

FEE: **\$50.00** Note: Permit will **expire September 15** of current year.

Name _____

Street Address

Mailing Address

(if different from above)

Date of Birth _____ Male ___ Female ___ Height _____
Color of Eyes _____ Color of Hair _____

I hereby certify that I am accurately described above and agree to follow Southold Town's Shellfish Regulations.

Signature of Applicant Date

Daytime Phone

Email address

INSTRUCTIONS

A permit is required of anyone 10 years of age or older. To obtain your permit by mail, please complete the application form and mail it in with a legible, current copy of your driver's license and proper fee to:

Elizabeth A. Neville
Southold Town Clerk
P O Box 1179
Southold NY 11971

Phone: 631-765-1800

Make checks payable to "Southold Town Clerk"
Please include a self-addressed, stamped envelope.
Thank you.