

# FOOD FISH & CRUSTACEA DEALER & SHIPPER PERMIT APPLICATION



Department of  
Environmental  
Conservation

This is an electronic copy of a Food Fish & Crustacea Dealer Permit application package.

**Your signature and the date are needed in TWO places:**

1. Food Fish & Crustacea Dealer Reporting Status Form – **Page 2**
2. Affirmation – **Page 4**

**The following are needed for the successful processing of your application:**

- Completely fill out all the requested information on the application.
  - If you are using a post office box to receive mail, please include a legal address (street address) with your application or it will be returned.
- The application **Affirmation** must be **signed and dated**.
- **Permit Fee:** ALL applications submitted by mail must be paid by check or money order payable to NYSDEC. Starter checks are not accepted. Cash and Visa/Mastercard are accepted for in-person applicants.
  - There will be a \$20.00 fee for all returned checks.
  - Applicants from outside the United States must contact the Marine Permit Office to determine acceptable forms of payment for application fees. U.S. Coast Guard License
- **Photograph:** Submit with your application a recent, clear passport size photograph of yourself, approximately 1 ½ x 2 inches. A photograph is not required if you are renewing from the preceding year.
- Applicants **under 16 years of age** must the application signed and notarized by a parent or legal guardian.
- If applying as a **corporate permit** (domestic corporation, domestic limited liability company, foreign business corporation, foreign LLC) or under an assumed name (DBA), provide the following:
  - Federal Tax ID on application or application
  - Legal documents establishing the corporation, LLC or DBA may include:
    - Certificate of Incorporation, Articles of Organization (LLC), Filing Receipt for Application of Authority for Foreign Businesses Operating in New York, or Certificate of Assumed Name (DBA).
  - Demonstrate the business is currently active and in good standing in New York State:
    - Refer to New York State Department of State's website for more information on obtaining copies of these documents: [www.dos.state.ny/corps/](http://www.dos.state.ny/corps/).

**All required documents and fees must be submitted by mail or in-person to DEC at the address below:**

**NYSDEC Marine Permit Office**  
123 Kings Park Blvd.  
Kings Park, NY, 11754  
**Phone:** (631) 444-0470 | **Email:** [MPO@dec.ny.gov](mailto:MPO@dec.ny.gov)

# FOOD FISH AND CRUSTACEA DEALERS AND SHIPPERS REPORTING STATUS FORM

All New York State Food Fish & Crustacea (FFC) license holders must fulfill reporting requirements. **This form will determine how you need to report.**

Name/Corporation Name on License:		FF&C Dealer/Shipper License No:
FF&C Dealer/Shipper Address:		Phone No:
City	State	Zip

### Please Indicate Your License Or Permit Status By Checking The Appropriate Box Below

<input type="checkbox"/> <b>A</b>	<p>A Federal Seafood Dealer Permit from NOAA Fisheries.</p> <p>Federal Dealer Permit # _____</p> <p><b>You are not required to report to NYSDEC because you report directly to NOAA Fisheries.</b></p>
<input type="checkbox"/> <b>B</b>	<p>A NYS FFC Dealer &amp; Shipper Permit and:</p> <ul style="list-style-type: none"> <li>• I <b>purchase</b> seafood directly from harvesters in NYS.</li> <li>• I <b>do not hold</b> a federal seafood dealer permit.</li> </ul> <p><b>You MUST submit reports to DEC.</b> If you need information on reporting, please enter the address/email you would like the information sent to:</p>
<input type="checkbox"/> <b>C</b>	<p>A NYS FFC Dealer &amp; Shipper Permit and:</p> <ul style="list-style-type: none"> <li>• I make <b>no purchases</b> directly from harvesters in NYS.</li> </ul> <p><b>By filling out and returning this form, you fulfill the reporting requirements for the year.</b></p> <p>If during the year, you make a purchase from a harvester in NYS, please contact the DEC at: <a href="mailto:VTR@dec.ny.gov">VTR@dec.ny.gov</a> or 631-444-0857.</p>

I hereby affirm under penalty of perjury that information provided on this form and all attachments submitted herewith is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law. I further affirm that I am aware of the applicable sections of the Environmental Conservation Law and Official Compilation of Codes, Rule and Regulations of the State of New York and fully understand them. I understand violation of these laws and regulations may subject me to criminal and civil penalties including fine imprisonment, revocation of license or a combination of any of these penalties.

_____	_____
Print Name	Print Title
_____	_____
Authorized Signature	Date



# Department of Environmental Conservation

Marine Resources Permit Office  
Nissequogue River State Park  
123 Kings Park Boulevard  
Kings Park, New York 11754  
Phone: (631) 444-0470  
Email: MPO@dec.ny.gov

# Year 2024

## Application for Marine Permits

January 2, 2024

Applicant Name: \_\_\_\_\_

Mailing Address

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_ - \_\_\_\_\_

Country: \_\_\_\_\_

Home Address (If different)

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_ - \_\_\_\_\_

Country: \_\_\_\_\_

Other Address for Business or Facility Location

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_ - \_\_\_\_\_

Country: \_\_\_\_\_

Corporation?  Yes  No

For Corporate Applicants, Are you a Corporation in Good Standing?  
 Yes  No

Country Issuing Taxpayer Id: \_\_\_\_\_

NYS Domicile?  Yes  No

Township: \_\_\_\_\_

County: \_\_\_\_\_

Taxpayer ID/SSN: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Fax Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Physical Description (N/A if Corporation)

Date of Birth: \_\_\_\_\_

Gender:  Male  Female

Hair Color: \_\_\_\_\_

Eye Color: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_

## Permit Year 2024

Permit Fee \$250. \_\_\_\_\_

Permit Type: Food Fish/Crustacea Dealer/Shipper Company Name: \_\_\_\_\_

Federal Dealer Permit?  Yes  No Federal Permit Number \_\_\_\_\_

Contact Information

Role: Authorized Representative Business Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Contact Information

Role: Corporate Officer Business Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Contact Information			
Role: Partner	Business Phone:	Home Phone:	
First Name:	Last Name:		
Street:	City:	State:	Zip:

Contact Information			
Role: Sole owner	Business Phone:	Home Phone:	
First Name:	Last Name:		
Street:	City:	State:	Zip:

**Total Amount Due:**           \$250.00

**FREEDOM OF INFORMATION**

The Department of Environmental Conservation (Department) periodically receives requests for commercial licensee records pursuant to New York's Freedom of Information Law (FOIL). The Department responds to such requests in accordance with Public Officers Law Article 6 (FOIL) and Article 6-a (Personal Privacy Protection Law).

**DECLARATION OF DOMICILE for New York State Resident Permits and Licenses:**

Pursuant to New York State law, I declare that I am domiciled within the State of New York and have maintained a fixed, permanent, and principal place of abode within the State of New York immediately prior to the time of filing this application and will continue to maintain such a place of abode for the duration of this permit and/or license. I understand that while I may have multiple residences, I can only have one true domicile.

If my domicile should change, I will notify the Department within seven business days. I understand that I must surrender my permit and/or license if I am no longer domiciled within the State of New York. I affirm and understand that should I fail to notify the Department within seven business days, the Department may immediately institute revocation proceedings pursuant to DEC regulations.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**AFFIRMATION:**

I hereby affirm under penalty of perjury that all of the information provided in this application and any applicable attachments provided to obtain this permit are true and accurate. I furthermore affirm that I am aware of and understand the applicable sections of the Environmental Conservation Law and the Official Compilations of Codes, Rules and Regulations of the State of New York. I understand that any violation of these laws and regulations may subject me to criminal and civil penalties including fine, imprisonment, revocation of license, or a combination of any of these penalties.

I affirm and understand that any false statement made herein is punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law and the offering of a false instrument for filing is punishable as a felony pursuant to Section 175.35 of the Penal Law.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Authorized Representative \_\_\_\_\_