

BOARD OF TRUSTEES
OF THE FREEHOLDERS AND COMMONALTY OF THE
TOWN OF SOUTHAMPTON



TRUSTEES OFFICE
116 HAMPTON ROAD
SOUTHAMPTON, NY 11968

PHONE: 631 287-5717
FAX: 631 287-5723

RECREATIONAL SHELLFISH APPLICATION

Documents to be submitted with application:

Please provide one of the following residency requirements:

- Driver's license with a Town of Southampton Street Address
- A current tax bill with the applicant's name listed in the owner's box
 - * *If the tax bill is in a corporation or LLC, please supply Articles of Incorporation or LLC documentation*
 - * *If the tax bill is in your spouse's name, please include a copy of your marriage certificate*
- Three (3) utility bills service to a street address in the township
 - * *One current, one from six months ago, and one from a year ago*

Name (Please Print): _____

Town of Southampton Street Address: _____

Mailing Address (if different from above): _____

E-mail: _____

Phone #: _____ Alt. Phone #: _____

Date of Birth: _____ Height: _____

Color of Eyes:	_____ Blue	Color of Hair:	_____ Black
	_____ Brown	(Choose only one)	_____ Blonde
	_____ Green		_____ Brown
	_____ Grey		_____ Grey
	_____ Hazel		_____ None
			_____ Red
			_____ White

Recreational Shellfish Licenses allow one guest 16 years or older. The guest must be with the license holder at the time of shell fishing. Any person under the age of 16 years old does not require a Shellfish License but must be accompanied by a license holder.

Applicant's Signature: _____ Date: _____

Shellfish License Replacement Cards including but not limited to lost or stolen cards will be charged \$5.00

Please note that all Shellfish Licenses must be processed in person in the Town Trustee's office as we now issue the Shellfish Licenses with a photograph.