## NEW JERSEY DIVISION OF FISH & WILDLIFE 2016 Striped Bass Bonus Program Party/Charter Boat Application and \* Child Support Certification (see back of form)

Date	Port	
Boat Name	# Passe	ngers
Owner's NameLast	First	Middle
AddressNumber and Street		
City	State	Zip Code
Date of Birth	Email:	
Telephone Number(s)		
Captain's Name (if different from owner)		
Completed application <b>MUST</b> include:	Copy of Valid F Copy of each Ca	
MAIL COMPLETED APPLICATION TO		ty/Charter Application
<ul> <li>non-transferable between v</li> <li>NOT mailed to boat owner</li> </ul>	essels. s. Boat owners will	complete one application per vessel be contacted when permits are ield Station – 360 N. New York

\*\*NJ Division of Fish and Wildlife (Division) staff are now responsible for conducting field interviews for the **Access-Point Angler Intercept Survey** (**APAIS**). As a participant of the Striped Bass Bonus Program, your cooperation with Division staff is expected and appreciated. Please be aware that Division staff may board your party boat for interviews or request interviews from charter boat patrons upon arrival at the dock\*\*

Rd. Port Republic, NJ 08241.

The Division has developed a voluntary Bonus Program e-mail list for special notices, regulation updates, emergency closures, etc. Go to *njfishandwildlife.com* and click on "E-mail Lists" to subscribe to the "Marine Fisheries" list.

If you have any questions regarding this application, please call 609-748-2020 or email <a href="mailto:sbbp@dep.nj.gov">sbbp@dep.nj.gov</a>

DIVISION OF FISH & WILDLIFE USE ONLY		
Submitted: For-Hire Saltwater Registration 🗖 Captain's License 🗖	Child Support Form	
Fish Possession Permit #s Issued		
Date Delivered to Applicant	Initials	

## NJDEP Division of Fish and Wildlife

## **SUPPLEMENTAL LICENSE APPLICATION** Child Support Certification Form - Marine Fisheries

Socia	l Security Number	Calendar Y	Year 20
Pleas	e certify, under penalty of perjury, the following:		
a.	Do you currently have a child-support obligation?	yes	no
	(1) If "Yes," are you in arrears in payment of said obligation?	yes	no
	(2) If "Yes," does the arrearage match or exceed the total amount payable for the past six months?	yes	no
b.	Have you failed to provide any court-ordered health insurance coverage during the past six months?	yes	no
c.	Have you failed to respond to a subpoena related to either paternity or child-support proceeding?	yes	no
d.	Are you the subject of a child-support related arrest warrant?	yes	no

In accordance with N.J.S.A. 2A:17-56,44d, an answer "Yes" to any of the questions (2) through d will result in a denial of licensure or certification. Furthermore, any false certification of the above may subject you to a penalty, including but not limited to, immediate revocation or suspension of licensure or certification.

DateApplicant's Name (Please Print)Applicant's Signature			
	Date	Applicant's Name (Please Print)	Applicant's Signature

\* Pursuant to N.J.S.A. 2A17-56.44e. of the New Jersey Child Support Enforcement Law, the Division of Fish and Wildlife is required to obtain your Social Security Number. The Division is further obligated to provide your Social Security Number to the Probation Division or other agency responsible for child support enforcement.