TOWN OF HUNTINGTON
ANDREW P. RAIA, TOWN CLERK
100 MAIN ST., HUNTINGTON NY 11743
(631) 351-3206

2025- 2026

FOR OFFICE USE ONLY
Date/Time Stamp below:

Permit # _____ Replaced:_____

#Decal Sets: _____ Replaced:_____

Date Issued: _____ Clerk: _____

New _____ Renewal _____

Receipt # _____ Clerk _____

APPLICATION FOR SHELLFISH TAKER'S PERMIT

PLEASE WRITE LEGIBLY AND PROVIDE THE INFORMATION REQUESTED BELOW: (Failure to comply may result in denial of permit.)

PLACE CHECKMARK (√) IN BOX THAT APPLIES FOR PERMIT TYPE DESIRED
(All permit fees are non-refundable.)

☐ **STANDARD COMMERCIAL, $400 FEE (SR. CITIZEN, 60+, $50 FEE) (PERMIT EXPIRES MARCH 31)**

☐ **JUNIOR (UNDER 18 YRS.) COMMERCIAL, $50 FEE (PERMIT PERIOD MAY 1 THROUGH OCTOBER 01)**

☐ **PERSONAL, $5 FEE (SR. CITIZEN, 60+, 3 YR. PERMIT NO FEE) (PERMIT EXPIRES MARCH 31)**

☐ **CLAM GAUGE, $3 FEE**

I, _____
(Print Last Name, First, Middle Initial)

residing at: _____
(Print Number and Street - P.O. Box Number Unacceptable) (Town) (State) (ZipCode)

and having my principal place of abode and domicile in the Town of Huntington <u>for at least 6 months prior to the date of submission of this application</u>, do hereby apply to the Town Clerk of the Town of Huntington for permission to take shellfish from lands held by the Trustees of the Town of Huntington, as provided by the Town of Huntington Shellfish Management Local Law and I do hereby agree to abide by the said law and the provisions of the New York State Environmental Conservation Law.

MAILING ADDRESS (if different from above): _____
(Post Office Box Number Unacceptable)

TELEPHONE # (Day)_____(Night)_____ EMAIL ADDRESS: _____

STATE PERMIT TYPE (required for Commercial Permits): _____ STATE PERMIT #: _____

BIRTHDATE: _____ HAIRCOLOR: _____ EYECOLOR: _____

HEIGHT: _____ WEIGHT: _____ VEH. LIC. PLATE #: _____

LIST CURRENT, VALID NYS REGISTRATION NUMBER/S OF ALL VESSELS (current, valid NYS Registration/s required as proof) THAT MAY BE USED BY APPLICANT WHEN HARVESTING SHELLFISH (registrations listed must <u>remain</u> current):

VESSEL 1: _____; VESSEL 2: _____

LIST <u>ALL</u> <u>*CONVICTIONS*</u> FOR VIOLATIONS OF <u>ANY</u> LOCAL SHELLFISH LOCAL LAW OR THE NEW YORK STATE ENVIRONMENTAL CONSERVATION LAW RECEIVED WITHIN THE LAST *FIVE* (5) YRS.:

<u>Jurisdiction</u>	**<u>Offense</u>**	**<u>Date of Conviction</u>**
_____	_____	_____
_____	_____	_____
_____	_____	_____

LIST ATTACHED PROOF OF RESIDENCY SUBMITTED: _____

NOTICE: Section 210.45 of the NYS Penal Law states as follows: A person is guilty of making a punishable false written statement when he knowingly makes a false statement, which he does not believe to be true, in a written instrument bearing a legally authorized form notice to the effect that false statements made therein are punishable. Making a punishable false written statement is a Class A Misdemeanor.

I, the undersigned, hereby state and affirm that the information in this application for Shellfish Taker's Permit is complete, true and correct and my Documentation for Proof of Residency is true and correct. I acknowledge receipt of a copy of the Huntington Shellfish Management Local Law (Town Code, Chapter 166), and I understand that submitting false information and/or the violation of applicable laws and regulations may subject me to criminal and civil penalties including revocation of permit, fine or imprisonment or a combination thereof.

Subscribed and sworn to before me this _____day of

_____, _____ _____ _____
Applicant Signature

_____ _____
NOTARY PUBLIC **Date Signed by Applicant**

8/15/25bh