

## **Fishing Outfitter License**

## ALL INFORMATION IS REQUIRED TO BE CONSIDERED A COMPLETE APPLICATION

Incomplete applications will not be processed and will be returned to the applicant ☐ New ☐ Renewal – Outfitter License #\_\_\_\_ ☐ Update- Outfitter License #\_\_\_ A fishing outfitter license authorizes a person to solicit for quiding services or provide quiding services or pro taking or attempting to take fish (including bowfishing) and which may have a fishing guide(s) authorized t clients on behalf of the license holder. **Select Tier Outfitter Level** Office Use Only ☐ Tier 1 (0 Fishing Guides) ☐ Tier 2 (1 or more Fishing Guides) IWVC Comments: **APPLICANT PERSONAL INFORMATION** KDSS Name of Applicant (First, Middle Initial and Last Name): Courtnet Final Recommendation Yes No Social Security #: If no, provide justification: Mailing Address: KDFWR Law Enforcement Director or Designee: City: \_\_\_\_\_ State: Zip Code: Age: Date of Birth: Height: Hair: Email: Phone: County (if resident) Kentucky Resident **APPLICANT BUSINES** Name of Business: **Business Addr** \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Business ID/EIN #:\_\_\_\_\_ County: \_\_\_\_\_ Alternate Address for License Mailing (if applicable): City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_

## FISHING GUIDE INFORMATION (if relevant)

A fishing guide is a person licensed to assist a fishing outfitter license holder's client(s) in taking or attempting to take fish and is employed by or contracted with a fishing outfitter license holder. Each person who desires to also be a fishing guide must also apply for a fishing guide license on a separate application.

Fishing Guide # 1	Fishing Guide # 3	
APPLICANT PERSONAL INFORMATION	APPLICANT PERSONAL INFORMATION	
Name of Applicant (First, Middle Initial and Last Name):	Name of Applicant (First, Middle Initial and Last Name):	
F&W Customer ID #:	F&W Customer ID #:	
Mailing Address:	Mailing Address:	
City:	City:	
State: Zip Code:	Zip Code:	
Age: Date of Birth:	Age: Date of Birth:	
Fishing Guide # 2	Fishing Guide # 4	
APPLICANT PERSONAL INFORMATION	APPLICANT PERSONAL INFORMATION	
Name of Applicant (First, Middle Initial and Last Name):	Name of Applicant (First, Middle Initial and Last Name):	
F&W Customer ID #	F&W Customer ID #:	
Mailing Address:	Mailing Address:	
City:	City:	
State: Zip Code:	State: Zip Code:	
Age: Date of Birth:	Age: Date of Birth:	

## FISHING HELPER INFORMATION (if relevant)

A fishing helper is a person who is in the same boat or is directly alongside of the fishing outfitter if standing on a stream or riverbank while guiding others in the taking or attempting to take of fish and must be registered by the fishing outfitter license holder.

Fishing Helper # 1	Fishing Helper # 3	
HELPER INFORMATION	HELPER INFORMATION	
Name of Applicant (First, Middle Initial and Last Name):	Name of Applicant (First, Middle Initial and Last Name):	
F&W Customer ID #:	F&W Customer ID #:	
Mailing Address:	Mailing Address:	
City:	City:	
State: Zip Code:	Zip Code:	
Fishing Helper # 2	Fishing Helper # 4	
HELPER INFORMATION	HELPER INFORMATION	
Name of Applicant (First, Middle Initial and Last Name):	Name of Applicant (First, Middle Initial and Last Name):	
F&W Customer ID #:	F&W Customer ID #:	
Mailing Address:	Mailing Address:	
City:	City:	
State: Zip Code:	State: Zip Code:	

Please indicate all the fish you plan to solicit for guiding services or provide	guiding services:
☐ Crappie ☐ Catfish ☐ Black Bass (Largemouth, Smallmouth, Spotted) ☐	Trout Muskellunge
☐ Panfish ☐ Percid (Walleye, Saugeye, Sauger) ☐ Temperate Bass (Striped, Yello ☐ Other:	ow, White, Hybrid) 🗌 Bowfish
Note: Every month you must report guiding activity conducted by you or your fishing guides as <a href="https://app.fw.ky.gov/commReport">https://app.fw.ky.gov/commReport</a>	specified in 301 KAR 3:10 at
The following items must be submitted for each year by the applicant. These outfitter applicants:	e items are required for all
: NCIC/LINK check- Background check from Kentucky State Police – All applic background check each year. The background check can be found at: https://www.kentuckystatepolice.ky.gov/background-check-forms	cants must have a CORRENT
: Copy of Boater Education Certificate- for those outfitters or guides guiding	inglers by boat*
: Copy of CPR Certification (Valid the entire license year)*	~
: Copy of First Aid Certification (Valid the entire license year)*	
: Copy of Valid KY Fishing License and applicable Trout Stamp	
: Copy of Valid Driver's License or State Identification Card	
* If you possess a current USCG OUPV Captain's license, you may send a copy of it in lieu of the Certification.	ne Boater Education, CPR and First Aid
PAYMENT INFORMATION License & Fees: https://www.kyk.gov/Licenses/Pages/Fees	<u>.aspx</u> and 301 KAR 5:022
Amount Enclosed:	The condination and assument
Statement of Fact: (Required by KRS 164.772)	The application and payment may be submitted online at
I hereby state that I am not in arrears or default on a repayment obligation under any financial assistance program with Kentucky Higher Education Assistance Authority. I understand that if I am in arrears or default on a repayment obligation under any financial	fw.ky.gov/dclapp or via mail to: Kentucky Department of Fish and Wildlife Resources
assistance program with Kentucky Higher Education Assistance Authority, my license or	Law Enforcement Division
permit may not be issued a centwed.  Please allow 10-15 business days for processing. Applications are accepted online at <a href="fw.ky.gov/dclapp.orv.a/he/mail">fw.ky.gov/dclapp.orv.a/he/mail</a> and not emailed or delivered in person to KDFWR	#1 Sportsman's Lane Frankfort, KY 40601 ATTN: Fishing Outfitter License
headquarters in Frankfort	Make checks payable to <b>KDFWR</b>
I, the pader igned, hereby state that upon signing this instrument, the Kentucky Department of and all of its employees shall be released of any liability that might occur as a result of my issuathat I have read and understand 301 KAR 3:150 . Further, I certify that, to the best of mis correct and true. All licenses are subject to the requirements of KRS Chapter 150 and support	ance of this license or permit. I certify my knowledge, the information herein
If you have additional questions, please call 1-800-858-1549 to speak with a representative from	m the Division of Law Enforcement.
<b>C</b> :	
Signature:	