



Pennsylvania Fish and Boat Commission  
 Charter Boat/Fishing Guide Program  
 PO Box 68900  
 Harrisburg, PA 17106-8900  
 717-705-7942

# Pennsylvania Fish & Boat Commission

## CHARTER BOAT/FISHING GUIDE PERMIT APPLICATION

Type of Permit requested: \_\_\_ Resident (\$100) \_\_\_ Non-resident (\$400)

**INSTRUCTIONS**

- Print clearly or type form. \_\_\_\_\_ New Application \_\_\_\_\_ Permit Number
- Include applicable permit fee with application – make check payable to **PFBC (DO NOT SEND CASH)**.
- Include photocopies of: •CPR Certificate •First Aide Certificate •Current Valid PA Fishing License • Insurance Liability Coverage
- Submit application form, check for appropriate fee, and all supporting documents to address listed above.

| APPLICANT INFORMATION   |                   |                |   |           |             |               |        |        |  |
|---|-------------------|----------------|---|-----------|-------------|---------------|--------|--------|--|
| PREFIX  | FIRST             | M.I.           | LAST  | SUFFIX    | TELEPHONE   |               |        |        |  |
| STREET ADDRESS  |                   |                | CITY  | STATE     | ZIP         |               |        |        |  |
| MAILING ADDRESS   |                   |                | CITY  | STATE     | ZIP         |               |        |        |  |
| COUNTY OF LEGAL RESIDENCE   | DRIVERS LICENSE # | STATE OF ISSUE | DATE OF BIRTH   | EYE COLOR | HAIR COLOR  | HEIGHT        | WEIGHT | GENDER |  |
| BUSINESS INFORMATION  |                   |                |   |           |             |               |        |        |  |
| *** <input type="checkbox"/> Check here if same as <i>Applicant Information</i> above. ***  |                   |                |   |           |             |               |        |        |  |
| BUSINESS NAME   |                   |                |   | COUNTY    |             | TELEPHONE     |        |        |  |
| BUSINESS ADDRESS  |                   |                | CITY  | STATE     | ZIP         | FAX NUMBER    |        |        |  |
| WEB SITE URL  |                   |                | EMAIL ADDRESS   |           |             |               |        |        |  |
| <input type="checkbox"/> Check here if you authorize the PFBC to include your business on our web site.   |                   |                |   |           |             |               |        |        |  |
| Applicants must possess current certification in Basic First Aid and Cardio Pulmonary Resuscitation   |                   |                | Applicants must possess and maintain minimum insurance coverage while conducting a Guide operation. Please provide: |           |             |               |        |        |  |
| DATE OF CERTIFICATION   |                   | PROVIDER       | INSURANCE COMPANY   |           |             | POLICY NUMBER |        |        |  |
| If guiding operations use a boat (float tubes are not considered boats), the guide must possess a Boating Safety Education Certificate or USCG operators license. I possess: <input type="checkbox"/> USCG License <input type="checkbox"/> Boating Safety Education Certificate ( <i>Send appropriate copy with application</i> )  |                   |                |   |           |             |               |        |        |  |
| BOATS - list boats used in guiding business   |                   |                |   |           |             |               |        |        |  |
| MAKE  | MODEL             | LENGTH         | REGISTRATION NUMBER   |           |             |               |        |        |  |
|   |                   |                |   |           |             |               |        |        |  |
|   |                   |                |   |           |             |               |        |        |  |
|   |                   |                |   |           |             |               |        |        |  |
| WATERS – list the four primary waters where guide operations will occur   |                   |                |   |           |             |               |        |        |  |
| 1. _____  |                   |                |   |           |             |               |        |        |  |
| 2. _____  |                   |                |   |           |             |               |        |        |  |
| 3. _____  |                   |                |   |           |             |               |        |        |  |
| 4. _____  |                   |                |   |           |             |               |        |        |  |
| PRIMARY FISH - list species that will be targeted, check all that apply   |                   |                |   |           |             |               |        |        |  |
| <input type="checkbox"/> Black Bass <input type="checkbox"/> Striped Bass <input type="checkbox"/> Muskellunge/Pike <input type="checkbox"/> Panfish <input type="checkbox"/> Shad <input type="checkbox"/> Steelhead <input type="checkbox"/> Trout <input type="checkbox"/> Walleye <input type="checkbox"/> Flathead Catfish   |                   |                |   |           |             |               |        |        |  |
| OTHER SPECIES: _____  |                   |                |   |           |             |               |        |        |  |
| <i>I have read and understand the Charter Boat/Fishing Guide regulations, and I agree to comply with all Federal laws and regulations involving boats carrying passengers for hire on federally navigable waters. My signature below acknowledges that I will comply with these regulations. I certify that the information contained in the application is true and correct to the best of my knowledge, information and belief. This certification is made subject to the penalty of Section 4904 of Crimes Code (18 Pa. C.S.A. § 4904) (relating to Unsworn Falsification to Authorities) and Section 908 of the Fish and Boat Code (30 Pa. C.S. § 908) (relating to False Identification or False or Fraudulent Statements on Reports).</i> |                   |                |   |           |             |               |        |        |  |
| SIGNATURE   |                   |                |   |           |             | DATE          |        |        |  |
| OFFICIAL USE ONLY   |                   |                |   |           |             |               |        |        |  |
| Permit Number: _____  |                   |                |   |           | Date: _____ |               |        |        |  |