



**Saltwater Charter Application**  
 South Carolina Department of Natural Resources  
 Commercial License Office  
 PO Box 12559 Charleston, SC 29422-2559  
 (843)953-9301 press 4  
 www.dnr.sc.gov

**For Office Use:**

  
  
  
  
  
  
  
  
  
  

**License Number:**

RF \_\_\_\_\_ - \_\_\_\_\_

**THIS APPLICATION MUST BE COMPLETE**

**This is a Non-transferable license for a Vessel**

**\* If you are a business you must provide the FEIN otherwise the license will not go in business name.**

Business Name \_\_\_\_\_ FEIN \_\_\_\_\_

**-Or-**  
 Customer ID# \_\_\_\_\_ or SSN \_\_\_\_\_

DL #/State ID # \_\_\_\_\_ State \_\_\_\_\_ Date of Issue \_\_\_\_\_  
 (mm/dd/yyyy)

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

County \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Date of Birth \_\_\_\_\_ Sex M F Race \_\_\_\_\_ Email \_\_\_\_\_

**\* Person Associated with the business** \_\_\_\_\_

**\* Physical Address (if different from mailing address)** \_\_\_\_\_

Vessel's Name \_\_\_\_\_ State Reg. #/ USCG# \_\_\_\_\_

Hull Id # \_\_\_\_\_ Length \_\_\_\_\_ Ft. \_\_\_\_\_ In.

Max # of Anglers \_\_\_\_\_ Tonnage (if vessel is Coast Guard registered) \_\_\_\_\_

Vessel is kept at (circle one): Marina or Trailered/ Private Dock

Marina's Name \_\_\_\_\_ What boat landing do you use?  
 Address \_\_\_\_\_ Boat Landing Name \_\_\_\_\_  
 City \_\_\_\_\_ Boat Landing County \_\_\_\_\_  
 State \_\_\_\_\_ Zip \_\_\_\_\_

Is this vessel also being used for a trawler (circle one)? Yes or No

**\*\*Circle the Species you will be targeting\*\***

Flounder Red Drum Spotted Seatrout Black Drum Sheepshead Snapper/ Grouper Dolphin/ Wahoo  
 King/ Spanish mackerel Cobia Billfish Shark Tuna Crab Shellfish Other \_\_\_\_\_

**\*Please provide a copy of the Captain's Coast Guard credentials**

**\*\*Reminder: Reporting is required for Charter licensing\*\***

Captain's Name \_\_\_\_\_ Email \_\_\_\_\_

SSN \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ OR Customer ID# \_\_\_\_\_ Date of Birth \_\_\_\_\_

DL #/State ID# \_\_\_\_\_ State \_\_\_\_\_ Date of Issue \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 (mm/dd/yyyy)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

USCG Capt. License #: USA \_\_\_\_\_ USCG Capt. License Expiration Date: \_\_\_\_\_

**Please Indicate Type of Vessel License Needed:**

	SC Resident Fee	Nonresident Fee
<b>6 or Less Passengers</b>	<b>\$275</b>	<b>\$550</b>
<b>7 – 49 Passengers</b>	<b>\$450</b>	<b>\$900</b>
<b>50 or More Passengers</b>	<b>\$650</b>	<b>\$1,300</b>

I understand that persons whose privileges are suspended are not eligible to apply for, hold, or use SCDNR licenses, permits, or tags; I affirm that I am eligible to apply for, hold and use the above selected privileges and that all information is correct and true. According to SC Code of Laws, license holder(s) may be required to submit monthly reports and/ or obtain permits. Residents, please provide a copy of your SC driver's license or SC issued identification card. Any address change made on this application will update all DNR records attached to this customer identification number only. No out of state checks accepted. No refunds.

Signature \_\_\_\_\_ Date \_\_\_\_\_

The South Carolina Department of Natural Resources prohibits discrimination on the basis of race, color, gender, national origin, disability, religion or age. Direct all inquiries to the Office of Human Resources, PO Box 167, Columbia, SC 29202.