



Commercial Fisheries Entry Commission Request for Duplicate Licenses

PO Box 110302
Juneau, AK 99811-0302
Phone: 907-789-6150
Toll-Free: 1-855-789-6150
Fax: 907-789-6170
www.cfec.state.ak.us

Please use this form to request a replacement permit card, vessel triangle metal plate, vessel license receipt or a vessel license sticker if the original issued license for the current calendar year has been lost, not received in the mail, stolen or damaged. This form must be signed, notarized and mailed/faxed to the Commercial Fisheries Entry Commission (CFEC) with the appropriate fees. Please submit payment by check, money order or use the attached credit card authorization. All sections of this form must be complete to avoid delays in processing.

Applicant Information:

Applicant's Name: _____ CFEC ID#: _____ Date of Birth _____

Permanent Mailing Address: _____

City: _____ State: _____ Zip: _____ Phone Number: _____ Check if Unlisted _____

Temporary Mailing Address (for these licenses): _____

City: _____ State: _____ Zip: _____

License Information: When the duplicate is approved the original license becomes VOID and is ILLEGAL for use.

Indicate what happened to the license(s) Lost Not Received In The Mail Stolen Damaged

Provide a fax number or email address below for this form to be returned to for immediate use for fishing:

Fax Number: _____ Email Address: _____

Permit Card: _____ FEE
CFEC FISHERY PERMIT NUMBER/ALPHA CFEC USE ONLY/YEAR/SEQUENCE/ALPHA ADFG NUMBER \$20.00

Permit Card: _____ \$20.00
CFEC FISHERY PERMIT NUMBER/ALPHA CFEC USE ONLY/YEAR/SEQUENCE/ALPHA ADFG NUMBER

Vessel Triangle Metal Plate: _____ \$20.00
ADFG NUMBER VESSEL NAME USCG OR REGISTRATION NUMBER OVERALL LENGTH

Vessel License Receipt: _____ \$20.00*
ADFG NUMBER VESSEL NAME USCG OR REGISTRATION NUMBER OVERALL LENGTH

Vessel Sticker: _____ \$20.00*
ADFG NUMBER VESSEL NAME USCG OR REGISTRATION NUMBER OVERALL LENGTH

* Please note that if you are applying for a duplicate vessel license and sticker there is only one \$20 fee required.

Salmon Net Area Tab: _____ NO FEE
AREA

Certification: I certify that I am the: Permit holder Vessel owner *Agent or representative Other (explain) _____

Signature of Applicant _____ Date _____

*Authorization must be attached if signed or picked-up by someone else

Subscribed and sworn to before me this _____ day of _____, 20__ at _____

Notary Public (or Postmaster in Alaska) _____ Commission expires _____

CFEC staff must authorize the permit holder and/or vessel operator to begin fishing with a copy of this page. If it is after business hours, please send an email to dfg.cfec.licensing@alaska.gov. Once the email is received a determination will be made and you will be contacted as soon as possible.

Signature _____ Name and Title _____ Date Valid _____ Valid Through _____



Commercial Fisheries Entry Commission Credit Card Authorization

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I authorize the Commercial Fisheries Entry Commission (CFEC) to charge the card listed below. This payment is only valid for the items and amount listed.

Please indicate the permit and/or vessel numbers in the space provided and the total amount you are authorizing your card to be charged.

| FEES TO BE CHARGED TO CARD | | |
|---|-------------------------------|------------|
| Item(s) | Enter Permit & Vessel Numbers | Fee Amount |
| Permit(s): | | \$ |
| Vessel(s): | | \$ |
| Transfer Fees (\$50): | | \$ |
| Duplicate Fees (\$20): | | \$ |
| Immediate Fishing (\$80): | | \$ |
| Check here to have your licenses express mailed and that you agree to pay the current USPS express mail rate PLUS the CFEC service fee of \$15.00. | | |
| Total amount to be charged | | \$ |

Name of Cardholder: _____

Cardholder Phone Number: _____

Cardholder Signature: _____ Date: _____

Card type: Visa Mastercard Discover

Expiration Date: ____ / ____

Credit Card #: _____ - _____ - _____ - _____

DO NOT EMAIL THIS FORM. PLEASE FAX OR MAIL FORM.