



**APPLICATION FOR INDIANA COMMERCIAL FISHING LICENSES**

State Form 54867 (R5 / 1-23)  
Approved by State Board of Accounts, 2023

**INDIANA DEPT. OF NATURAL RESOURCES**  
Sugar Ridge Fish and Wildlife Area  
2310 E. SR 364  
Winslow, IN 47598  
Telephone: (812) 789-2724  
www.wildlife.IN.gov

**Instructions:**

1. Please type or print information.
2. Be sure to read regulations.
3. Please attach check or money order made payable to Indiana DNR as required by IC 14-22-13 and IC 14-10-2-1 and mail to address shown above.

Type of License (*Check One*)  New  Renewal Old License Number \_\_\_\_\_

Name of Applicant (*first name, middle initial, last name*) \_\_\_\_\_

Address (*Number and Street*) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

County \_\_\_\_\_ Telephone Number ( \_\_\_\_\_ ) \_\_\_\_\_

E-mail Address \_\_\_\_\_ Date of Birth \_\_\_\_\_

**BUSINESS INFORMATION:**

Name of Business (*if applicable*) \_\_\_\_\_

Business Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

County \_\_\_\_\_ Telephone Number ( \_\_\_\_\_ ) \_\_\_\_\_

Location of Principal Office (*if different from above*): \_\_\_\_\_

License/Tag Type	Fee	Number	Total Amount
Ohio River Commercial Fishing License, including 10 Tags ( <i>residents and non-residents</i> )	\$200.00		
Additional Extra Ohio River Gear Tags ( <i>groups of 10</i> )	\$20.00		
Inland Waters Commercial Fishing License, including 4 gear tags ( <i>available to residents only</i> )	\$40.00		
Additional Inland Water Gear Tags ( <i>groups of 4</i> )	\$20.00		
Inland Water Roe Harvesters License ( <i>available to residents only</i> )	\$1,385.00		
Ohio River Roe Harvesters License ( <i>residents or non-residents</i> )	\$1,385.00		
Commercial Roe Dealers License	\$1,385.00		
		TOTAL PAID \$	

NOTE: A resident of Indiana must have their true primary residence in Indiana, have lived in Indiana for 60 consecutive days, and not claim residency for hunting, fishing, or trapping licenses in another state or country.

Under the penalties of perjury (*IC 35-44-22-1*), I certify that the information supplied by me is true and correct to the best of my knowledge.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

**FOR OFFICE USE ONLY**

Date Application Received \_\_\_\_\_ Check/Money Order Number \_\_\_\_\_

License Number \_\_\_\_\_ Date License Issued \_\_\_\_\_ License Year \_\_\_\_\_