



State of California – Department of Fish and Wildlife
CHANGE OF ADDRESS FORM

IMPORTANT: Fish and Game Code Section 7857 (m) requires licensees to notify the Department of their old and new address within three months when they move or acquire a new address.

							GO ID NUMBER
FIRST NAME			M.I.	LAST NAME			COMMERCIAL FISHING ID#
							L
DMV ID/STATE ID	DATE OF BIRTH MM/DD/YYYY	GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Nonbinary		HAIR COLOR	EYE COLOR	HEIGHT	WEIGHT
DAY TELEPHONE							
EMAIL ADDRESS							
PREVIOUS ADDRESS	MAILING ADDRESS						
	CITY					STATE	ZIP
	PHYSICAL ADDRESS (DO NOT USE PO BOX)						
	CITY					STATE	ZIP
CURRENT ADDRESS	MAILING ADDRESS						
	CITY					STATE	ZIP
	PHYSICAL ADDRESS (DO NOT USE PO BOX)						
	CITY					STATE	ZIP
SIGNATURE							DATE
X							

SUBMIT BY MAIL TO:

California Department Fish And Wildlife (CDFW)
 License and Revenue Branch
 1740 N. Market Blvd
 Sacramento, CA 95834

OR

EMAIL: LRBCOMM@WILDLIFE.CA.GOV