



**REQUEST FOR VERIFICATION OF COMMERCIAL FISHING LICENSING RECORDS**

DFW 1452 (REV. 01/23/24)

**TYPE OR PRINT CLEARLY.**

REASON FOR REQUEST

DATE INFORMATION NEEDED		METHOD TO RECEIVE INFORMATION: <input type="checkbox"/> EMAIL <input type="checkbox"/> FAX <input type="checkbox"/> MAIL <input type="checkbox"/> CERTIFIED COPY			
REQUESTER'S FIRST NAME		M.I.	LAST NAME		
EMAIL ADDRESS		DAY TELEPHONE		FAX NUMBER	
MAILING ADDRESS		CITY		STATE	ZIP CODE

With accordance to [California Civil Code §1633.5\(b\)](#), I acknowledge that by providing my electronic signature for this form, I agree that my electronic signature is legal binding equivalent to a handwriting signature. I hereby confirm that my electronic signature represents my execution or authentication of this form, and my intent to be bound by it

SIGNATURE <b>X</b>	TITLE	DATE
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I REQUEST THE DEPARTMENT OF FISH AND WILDLIFE TO PROVIDE ME WITH INFORMATION FOR:

**COMMERCIAL FISHING LICENSE RECORDS**

FIRST NAME	M.I.	LAST NAME
COMMERCIAL FISHING ID NUMBER <b>L</b>	DATE OF BIRTH	

CHECK THE BOX FOR EACH LICENSE YEARS YOU ARE REQUESTING VERIFICATION:

- |                                    |                                    |                                    |                                    |                                    |                                      |
|------------------------------------|------------------------------------|------------------------------------|------------------------------------|------------------------------------|--------------------------------------|
| <input type="checkbox"/> 2023-2024 | <input type="checkbox"/> 2020-2021 | <input type="checkbox"/> 2017-2018 | <input type="checkbox"/> 2014-2015 | <input type="checkbox"/> 2011-2012 | <input type="checkbox"/> 2008-2009   |
| <input type="checkbox"/> 2022-2023 | <input type="checkbox"/> 2019-2020 | <input type="checkbox"/> 2016-2017 | <input type="checkbox"/> 2013-2014 | <input type="checkbox"/> 2010-2011 | <input type="checkbox"/> 2007-2008   |
| <input type="checkbox"/> 2021-2022 | <input type="checkbox"/> 2018-2019 | <input type="checkbox"/> 2015-2016 | <input type="checkbox"/> 2012-2013 | <input type="checkbox"/> 2009-2010 | <input type="checkbox"/> OTHER _____ |

**COMMERCIAL FISHING LICENSE RECORDS**

TO OBTAIN VESSEL RECORDS, YOU MUST HAVE BEEN THE OWNER OF THE VESSEL DURING THE TIME PERIOD REQUESTED OR HAVE A SIGNED NOTARIZED STATEMENT FROM THE OWNER RELEASING THE RECORDS TO YOU.

FISH AND WILDLIFE BOAT NUMBER	VESSEL NAME
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CHECK THE BOX FOR EACH LICENSE YEARS YOU ARE REQUESTING VERIFICATION:

- |                                    |                                    |                                    |                                    |                                    |                                      |
|------------------------------------|------------------------------------|------------------------------------|------------------------------------|------------------------------------|--------------------------------------|
| <input type="checkbox"/> 2023-2024 | <input type="checkbox"/> 2020-2021 | <input type="checkbox"/> 2017-2018 | <input type="checkbox"/> 2014-2015 | <input type="checkbox"/> 2011-2012 | <input type="checkbox"/> 2008-2009   |
| <input type="checkbox"/> 2022-2023 | <input type="checkbox"/> 2019-2020 | <input type="checkbox"/> 2016-2017 | <input type="checkbox"/> 2013-2014 | <input type="checkbox"/> 2010-2011 | <input type="checkbox"/> 2007-2008   |
| <input type="checkbox"/> 2021-2022 | <input type="checkbox"/> 2018-2019 | <input type="checkbox"/> 2015-2016 | <input type="checkbox"/> 2012-2013 | <input type="checkbox"/> 2009-2010 | <input type="checkbox"/> OTHER _____ |

**COMMERCIAL FISH BUSINESS LICENSE RECORDS**

FIRST NAME	M.I.	LAST NAME
COMMERCIAL FISH BUSINESS ID NUMBER	BUSINESS NAME	
<input type="checkbox"/> 2023 <input type="checkbox"/> 2022 <input type="checkbox"/> 2021 <input type="checkbox"/> 2020 <input type="checkbox"/> 2019 <input type="checkbox"/> 2018 <input type="checkbox"/> 2017 <input type="checkbox"/> 2016 <input type="checkbox"/> 2015 <input type="checkbox"/> OTHER _____		

**FOR DEPARTMENT OF FISH AND WILDLIFE USE ONLY**

CDFW COMMENTS:

APPROVED BY	DATE RECEIVED	COMPLETED BY	DATE
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**RETURN FORM TO:** California Department of Fish and Wildlife  
License and Revenue Branch  
PO Box 944209, Sacramento, CA 94244-2090  
Phone: (916) 928-5822 Fax: (916) 419-7585  
[LRBCOMM@wildlife.ca.gov](mailto:LRBCOMM@wildlife.ca.gov)

FOR FISH LANDING AND CPFV LOG RECORDS, CONTACT:  
California Department of Fish and Wildlife  
Attn: **Marine Fisheries Statistical Unit (MFSU)**  
3030 Old Ranch Parkway, Ste. 400, Seal Beach, CA 90740  
Phone: (562) 342-7130 Email: [MFSU@wildlife.ca.gov](mailto:MFSU@wildlife.ca.gov)