



**2019 FREE LOW INCOME NATIVE AMERICAN SPORT FISHING LICENSE APPLICATION**

Free licenses are available only to Native Americans and their lineal descendants who:

1. Have resided continuously in California for the last six months;
2. Have never been convicted of a violation of the Fish and Game Code; and
3. Have a total annual household income which does not exceed federal poverty guidelines. See chart below for amounts. Add \$4,320 for each additional family member exceeding six.

Family Members in Household	Maximum Annual Household Income
1	\$12,140
2	\$16,460
3	\$20,780

Family Members in Household	Maximum Annual Household Income
4	\$25,100
5	\$29,420
6	\$33,740

Licenses will not be issued to applicants whose applications have not been completely filled out, or whose tribal affiliation has not been verified by a tribal registry or the Bureau of Indian Affairs.

**I. APPLICATION INFORMATION**

DMV/STATE ID NUMBER		STATE	GO ID NUMBER (IF KNOWN)			
FIRST NAME	M.I.	LAST NAME		MAIDEN NAME		
MAILING ADDRESS						
CITY		STATE	ZIP CODE	DAY TELEPHONE		
GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE <input type="checkbox"/> NONBINARY		HAIR COLOR	EYE COLOR	HEIGHT (Ft., In.)	WEIGHT	DATE OF BIRTH

**II. BUREAU OF INDIAN AFFAIRS VERIFICATION**

Submit one of the following methods of documentation as proof of tribal enrollment:

- A Certificate of Degree of Indian Blood (CDIB) from the Bureau of Indian Affairs;
- An official tribal roll card with roll number; or
- Certification of tribal enrollment (Submit this application to the superintendent of the appropriate Bureau of Indian Affairs office for completion of section below.)

**THIS SECTION TO BE COMPLETED BY BUREAU OF INDIAN AFFAIRS ONLY IF CDIB OR TRIBAL ROLL CARD IS NOT INCLUDED**

NAME AND TITLE OF CERTIFYING OFFICIAL		CERTIFYING OFFICIAL'S TELEPHONE NUMBER
CERTIFYING OFFICIAL'S ADDRESS		
CITY	STATE	ZIP CODE
NAME OF TRIBE OR BAND		ROLL NUMBER
SIGNATURE OF CERTIFYING OFFICIAL <b>X</b>		

**COUNTY OF RESIDENCE:**

San Bernardino, Riverside, San Diego, Santa Barbara, Los Angeles, Ventura, Orange, or Imperial	Del Norte, Shasta, Siskiyou, Humboldt, or Trinity	All other counties
Bureau of Indian affairs South California Agency 1451 Research Park Dr., Suite 100 Riverside, CA 92507	Bureau of Indian affairs Northern California Agency 364 Knollcrest Drive, Suite 105 Redding, CA 96002-0175	Bureau of Indian affairs Central California Agency 650 Capital Mall, Suite 8-500 Sacramento, CA 95814



**III. INCOME VERIFICATION**

In the space provided below, write the total annual gross income to the nearest dollar for yourself and all family members living with you. This includes income from any and all sources, including: salaries, commission, bonuses, social security or other pensions, unemployment insurance, rent, interest, welfare payments, grants, educational allowances, etc.

Your total annual gross income (before deductions) \$ \_\_\_\_\_ per year

Name of Each Family Member Living in the Household	Age	Relationship (spouse, son, parent, etc.)	Total Annual Income
<i>Total Gross Annual Income for Yourself and All Family Members</i>			\$ _____

**IV. APPLICATION CERTIFICATION**

I hereby certify under penalty of perjury that the information given on this application is true and correct to the best of my knowledge; that I have not been convicted of any Department of Fish and Wildlife violation; that I have resided continuously in California for six months or more immediately prior to the date of submitting this application; and that the incomes shown are complete, true, and correct.

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

Send this completed application to:

**California Department of Fish and Wildlife  
License and Revenue Branch  
1740 North Market Blvd.  
Sacramento, CA 95834**

**YOU MUST INCLUDE A PHOTOCOPY OF YOUR DRIVER'S LICENSE OR DMV/ID WITH THIS FORM**

