

Note: In order to fill and save this form electronically, it must be opened using Adobe Reader or Acrobat software. Save a copy of the file, open Adobe Reader, select File > Open and browse for the file you saved.

Mail to:
Department of Natural Resources
Bait Dealer Application - CS/1
PO Box 7924
Madison, WI 53707-7924

Bait Dealer's License Application

Form 9400-031 (R 7/18)

License Expires December 31

Notice: Use of this form is required by the Department for any application filed pursuant to s. 29.509, Wis. Stats. The Department will not consider your application unless you complete and submit this application form. Information collected may be used for participation in surveys, eligibility for approvals, law enforcement (including child support and tax delinquency enforcement) purposes and other secondary purposes. *The Department may also provide this information to requesters pursuant to Wisconsin's open records law, ss. 19.31-19.39, Wis. Stats.

* A social security number or federal employer identification number is REQUIRED when applying for a license according to chapter 29, Wis. Stats., but it may not be disclosed to anyone except the Department of Workforce Development or Department of Revenue.

Pursuant to the provisions of s. 29.509(3), Wis. Stats., I hereby apply for a: **Class A - \$50.00 (\$2,000 or more)** **Class B - \$10.00 (less than \$2,000)** bait dealer's license

to deal in bait for fishing purposes in the manner provided by the Wisconsin Statutes and Wisconsin Administrative Code.

Check here if you intend to harvest wild bait under the terms of this license.

Applicant's Name (Last, First, Middle)		Name of Firm			
Address		Firm Address			
City, State, Zip Code		City, State, Zip Code			
DNR Customer Number	Driver's License Number	Business Telephone Number (include area Code)			
* Social Security Number/Federal Employer Identification Number		Email			
Date of Birth (Mo. - Day - Yr.)	Color Eyes	Color Hair	Weight	Height	Sex <input type="radio"/> Male <input type="radio"/> Female

Source of Water
 Stream Private Well Lake City Water
 Other (Name) _____

Bait Sold By You Will Be Obtained From
 Public Waters Artificial Ponds Other Dealers
 Other (Explain) _____

Type of Bait Handled
 Minnows Crayfish Frogs

Were your license privileges revoked because of a conviction for a violation of the fish and game laws within the past year? Yes No

I hereby certify that I have maintained my permanent residence in Wisconsin for the previous thirty days and that my license privileges are not otherwise revoked. I have complied with all of the laws regulating the issuance and purchase of this license.

Withhold personal identifiers collected on this form from disclosure on any list of 10 or more individuals that the DNR is requested to provide to another person [s. 23.45, Wis. Stats.].

Signature of Applicant	Date Signed
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NOTICE OF APPEAL RIGHTS

If you believe that you have a right to challenge this decision, you should know that Wisconsin Statutes and Wisconsin Administrative Code establish time periods within which requests to review Department decisions must be filed. These time periods are as follows: for judicial review of a decision pursuant to ss. 227.52 and 227.53, Wis. Stats., you have 30 days after service of the decision to file your petition for review. Some Wisconsin Administrative Code sections provide for review of the Department decision pursuant to s. 227.42, Wis. Stats. Review should generally be sought within 30 days of the service of the decision.

The respondent in an action for judicial review is the Department of Natural Resources. You may wish to seek legal counsel to determine if any of the above time periods apply to this decision. This notice is provided pursuant to s. 227.48, Wis. Stats.