



**Office of the Town Clerk**  
*Diane M. Wilhelm*

Registrar of Vital Statistics

Records Management Officer

Marriage Officer

**SHELLFISH PERMIT APPLICATION**

Permit # \_\_\_\_\_

Resident Taxpayer Shellfish Permit

Temporary Resident Taxpayer

Issued \_\_\_\_\_

Issued \_\_\_\_\_

Expires \_\_\_\_\_

Expires \_\_\_\_\_

Resident Taxpayer Commercial Shellfish Permit  
(16 years & older) \$100.00

**Fees:**

15 days\$15.00

30 days\$30.00

60 days\$60.00

90 days\$90.00

Issued \_\_\_\_\_

Expires \_\_\_\_\_

Under 16 years of age

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Residence

\_\_\_\_\_  
Length of time resident in the Town of Riverhead

\_\_\_\_\_  
Age

\_\_\_\_\_  
Sex

\_\_\_\_\_  
Height

\_\_\_\_\_  
Eye color

\_\_\_\_\_  
Hair color

\_\_\_\_\_  
Domicile outside the Town of Riverhead



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**Real Property in town of Riverhead owned by applicant** \_\_\_\_\_

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