

**2025 REDUCED-FEE SPORT FISHING LICENSE APPLICATION**

DFW 356 (REV. 12/06/24) Page 1 of 2

**Fee: \$9.79 (includes 3% license buyer surcharge)****SPORT FISHING LICENSES ARE VALID FOR 365 DAYS FROM THE DATE OF PURCHASE.****INCOMPLETE OR UNSIGNED APPLICATIONS WILL BE RETURNED. ALLOW 15 BUSINESS DAYS FOR PROCESSING.**

To qualify for a reduced-fee sport fishing license, you must be a resident of the State who is 65 years of age or older and receive benefits through Supplemental Security Income (SSI) pursuant to Section 12200 of the Welfare and Institutions Code or Cash Assistance Program for Aged, Blind, and Disabled Legal Immigrants (CAPI) pursuant to Chapter 10.3 (commencing with Section 18937) of Part 6 of Division 9 of the Welfare and Institutions Code.

**Submit verification from the Social Security Administration or Department of Social Services confirming you are receiving Supplemental Security Income (SSI) or Cash Assistance Program for Aged, Blind, and Disabled Legal Immigrants (CAPI).**

Please select the appropriate box (based on your eligibility):

- ☐ I am 65 years of age or older and receive Supplemental Security Income (SSI) benefits. **(Submit your Benefit Verification Letter, SSA-L8151, SSA-L8155, SSA-L8166, or a similar statement from the Social Security Administration to verify your eligibility for this license.)**
- ☐ I am 65 years of age or older and receive benefits through the Cash Assistance Program for Aged, Blind, and Disabled Legal Immigrants (CAPI). **(Submit statement from the Department of Social Services to verify you are receiving CAPI.)**

**APPLICANT INFORMATION**

FIRST NAME	M.I.	LAST NAME	GO ID NUMBER (IF KNOWN)
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MAILING ADDRESS

CITY	STATE	ZIP CODE
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GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE <input type="checkbox"/> NONBINARY	HAIR COLOR	EYE COLOR	HEIGHT (Ft., In.)	WEIGHT	DATE OF BIRTH
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**METHOD OF RESIDENCY**☐ I have resided continuously in California for the last six months.☐ I am a Job Corps enrollee.☐ I am currently on active duty with the U.S. Armed Services.☐ I am not a resident of California.

DAY TELEPHONE (    )	E-MAIL ADDRESS
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**APPLICANT CERTIFICATION**

*I 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 Fish and Game violation; and that I meet all of the eligibility criteria for this license.*

*Digital Signature Certification (if a digital signature is used): 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 the 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>	DATE
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**CHECK BOX(ES) FOR ADDITIONAL ITEMS YOU WISH TO PURCHASE**

Description of additional items available online at [www.wildlife.ca.gov/Licensing/Fishing](http://www.wildlife.ca.gov/Licensing/Fishing)

- |  |   |
|--|---|
| <input type="checkbox"/> NORTH COAST SALMON REPORT CARD – \$8.50 | <input type="checkbox"/> OCEAN ENHANCEMENT VALIDATION – \$6.70      |
| <input type="checkbox"/> SECOND ROD VALIDATION – \$18.80         | <input type="checkbox"/> STEELHEAD REPORT CARD – \$9.53             |
| <input type="checkbox"/> STURGEON FISHING REPORT CARD – \$10.56  | <input type="checkbox"/> RECREATIONAL CRAB TRAP VALIDATION – \$2.83 |
| <input type="checkbox"/> SPINY LOBSTER REPORT CARD – \$11.59     |   |

**PAYMENT AUTHORIZATION**

**No Cash Accepted at Department Offices**

The California Department of Fish and Wildlife does not accept cash at its sales offices. Checks, money orders, and any debit or credit card with the Visa or Mastercard logo are accepted.

Indicate type of payment: ☐ Check\* ☐ Money Order\* ☐ Visa ☐ Mastercard

\*Make checks or money orders payable to **California Department of Fish and Wildlife**

TOTAL: \$ \_\_\_\_\_

**(Please do not send cash)**

CARD #: \_\_\_\_\_ EXPIRATION DATE (MM/YY): \_\_\_\_\_

CVC Number (On back of credit card) \_\_\_\_\_

I authorize CDFW to charge the above amount to my credit card (information provided above). I agree that I will pay for this purchase in accordance with the issuing bank cardholder agreement.

PRINT NAME (As it appears on credit card)

SIGNATURE

DATE (MM/DD/YYYY)

**YOU MAY SUBMIT THE REQUIRED DOCUMENTATION IN PERSON OR BY MAIL TO ANY OF THE OFFICES LISTED BELOW. ENSURE YOU ENCLOSE THE FOLLOWING WITH YOUR COMPLETED APPLICATION: (1) A PHOTOCOPY OF YOUR DRIVER'S LICENSE OR DMV ID, (2) PROOF OF ELIGIBILITY, AND (3) PAYMENT.**

**CALIFORNIA DEPARTMENT OF FISH AND WILDLIFE SALES OFFICES**

[www.wildlife.ca.gov](http://www.wildlife.ca.gov)

**EUREKA** – 619 Second Street, Eureka, CA 95501 (707) 445-6493

**FAIRFIELD** – 2825 Cordelia Road, Suite 100, Fairfield, CA 94534 (707) 428-2002

**FRESNO** – 1234 E. Shaw Avenue, Fresno, CA 93710 (559) 243-4005

**RANCHO CORDOVA** – 1701 Nimbus Road, Rancho Cordova, CA 95670 (916) 358-2900

**REDDING** – 601 Locust Street, Redding, CA 96001 (530) 225-2300

**SACRAMENTO** – License and Revenue Branch, PO Box 944209, Sacramento, CA 94244-2090 (916) 928-5805

**SAN DIEGO** – 3883 Ruffin Road, San Diego, CA 92123 (858) 467-4201