**APPLICATION**

# Unified Legally Blind Inland/Coastal Recreational Fishing License

*****Licenses may now be purchased online at gooutdoorsnorthcarolina.com*****

**Applicant Information:** Apply online at **Gooutdoorsnorthcarolina.com** or mail the completed application to **NCWRC 1707 Mail Service Center Raleigh, NC 27699.** There is no fee for this license which authorizes statewide fishing in all public waters.

NAME:_____
(First) (Middle) (Last)

WRC CUSTOMER# (if available)_____ Last Four of SSN#_____

RESIDENT ADDRESS:_____
Street City State Zip

MAILING ADDRESS:_____
(if different from above) Street or PO Box City State Zip

TELEPHONE NUMBER: (___)_____BIRTH DATE:_____
(Month) (Day) (Year)

EMAIL ADDRESS:_____

SIGNATURE:_____DATE:_____

**Department of Human Resources - Division of Services for the Blind**
**Certification of Insufficient Eyesight**
Application Must Be Certified Prior To Submission

Pursuant to G.S. 113-351 (c)(4)(b) - Lifetime Fishing License for the legally blind and on behalf of the Department of Human Resources, Division of Services for the Blind, the undersigned hereby certifies that the person identified above is a person whose vision with glasses is insufficient for use in ordinary occupations for which sight is essential.

| _____ | _____ | _____ |
|---|---|---|
| Registry Number | Local Social Worker or Registrar of the Blind | Date |

Revised 7/2023