Commonwealth of Massachusetts
Division of Marine Fisheries
Order form for: Lobster Trap Tags - 2010 Season

To process your order for tags, you **must** provide the following:

- ✓ **Completed official order form**
- ✓ **Photocopy of Massachusetts Commercial Lobster License (BOTH LEFT & RIGHT)**
- ✓ **Photocopy of valid current Federal Lobster Permit, if purchasing EEZ or MA/EEZ tags.**
- ✓ **Completed Tax Exemption Certificate from the state of Massachusetts** (see reverse side)***
- ✓ **Payment for tags in full (Orders received without payment in full will not be processed.)** ***If you are using a credit card, please be sure to sign in the signature line and note expiration date.***

Select the Type of Tag you are purchasing (select only one of the following): **Tag Type**

a. If you **only** hold a Massachusetts Coastal Lobster Permit…….... ☐MA
b. If you hold a Massachusetts Coastal Lobster Permit **and** a Federal Lobster Permit…….... ☐MA/EEZ
c. If you hold a Massachusetts Offshore Lobster Permit **and** a Federal Lobster Permit…….... ☐EEZ
d. If you **only** fish in LMA-3…….... ☐EEZ

Indicate the number of tags you will be purchasing, and calculate your fee:

Tag Type	LMA	DMF PERMIT ID#	Federal Permit #	# of Tags	Total	Cost	Total
						$.16 ea	$
				Please add 6.25% MA sales tax if not exempt* **			$
				ORDER TOTAL			$

*** **Tax exempt orders received without a Tax Exemption certificate will be charged sales tax.**

Check type of payment:* ☐ **Certified Check or Money Order** ☐ **Visa** ☐ **Master Card** ☐ **American Express**

**PERSONAL/COMPANY CHECKS AND CASH WILL NOT BE ACCEPTED*

Credit Card Number **Card Expiration (Mo/Yr Required)**

SIGNATURE **PRINT NAME** (as appears on credit card)

Last Name:_____ **First Name**:_____

SHIP TO (Street Address)_____**Telephone Number**: (_____)_____
REQUIRED FOR ORDER!

City:_____**MA Zip:**_____

(Street address required for prompt delivery)

Questions? Contact Jeanne at DMF (617) 626-1531 (jeanne.shaw@state.ma.us) before you mail your order form. *Please allow 4-6 weeks for delivery.*

Please mail orders to:
Stoffel Seals Corp
PO Box 825
Nyack, NY 10960-0825

Or Fax to: 845.353.3876

(over)