Request for Duplicate License or Permit

Mail to: SCDNR License Office • PO Box 11710 • Columbia, SC 29211-1710 • (803)734-3833 M-F 8:30-4:50 PM ET
Return this form along with appropriate fees. Visit *www.dnr.sc.gov* for additional licenses.

Applicant Information

Customer #	or	Social Security #	Date of Birth
C __ __ __ __ __ __ __ __ __		X X X -- X X -- __ __ __ __	__ __/__ __/__ __

Name *(as it appears on your SC Driver's License or ID Card)*

First	M Init	Last	Suffix (Sr, Jr, III, etc)

Home

Street	City	State	Zip	SC County of Residence

Mailing *(only if different from Home address)*

Street or PO Box	City	State	Zip	Driver's License or ID#

__ __ __ - __ __ __ - __ __ __   __ __ __ - __ __ __ - __ __ __

Phone __ Home __ Cell__Work   Phone __ Home __ Cell__Work   State of Issue

License Type

☐ *Recreational License $3.00*

   Type of License(s) Purchased _____

☐ *Antlerless Deer Tags $1.00 per Tag*

   Number of Tags Lost _____

☐ *Nongame Fish Tag $1.00 per Tag (Trotline, Trap, Gill Net, Hoop Net, Eel Pot)*

   Type of Tag Lost _____

   Lost Tag Number(s) _____

☐ *Shrimp Baiting Tags $1.00 per Tag*

   Number of Tags Lost _____

☐ *Bear Tag (No Charge)*

☐ *Lifetime License (No Charge)*

☐ *Disability License (No Charge)*

TOTAL DUE *Make Check Payable to SCDNR* _____

Hunter Education Certification

(HE) Hunter Education Number _____ State of Issue _____

➤ I affirm that I am not under suspension for any natural resources violation and I am eligible to apply for, hold, and use the above SCDNR licenses and permits and that the information provided above is true and correct.

Signature of Applicant _____ Date _____ Amount of Check $ _____

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