

STATE OF IDAHO
 OUTFITTERS AND GUIDES LICENSING BOARD
 1365 North Orchard – Room 172 – Boise, Idaho 83706
 Telephone (208) 327-7380 – Fax (208) 327-7382
 Enforcement (208) 327-7167
 licensing@oglb.idaho.gov - www.oglb.idaho.gov

For Board Use Only

Amount paid / date

Remitter

Payment Type

OUTFITTER LICENSE APPLICATION**For a Corporation, Firm, Partnership or other Business Entity****PLEASE TYPE OR PRINT ALL INFORMATION****A license fee will be required (upon approval of application) before license will be issued.****License Fees:** Submit fees in the form of a money order, cashier's check, certified check, or a check from an Idaho Outfitter/DA applicant made payable to the Idaho Outfitters and Guides Licensing Board (IOGLB), OR you may pay your fees using your credit card.**All first time applications** must be accompanied by an application fee.

A processing fee will be assessed on all returned checks or unprocessable credit cards.

Current fees can be found at IOGLB's website at www.oglb.idaho.gov**WE CANNOT ACCEPT CASH AT ANY TIME****PLEASE DO NOT PROVIDE ANY CREDIT CARD NUMBER IN WRITING***Call the IOGLB office at (208) 327-7380 with your credit card information***The following information will need to be provided to IOGLB:**

Amount Authorized

Billing Zip Code

Cardholder Name

Credit Card Number

Verbal Authorization provided by

Email address for receipt

*A processing fee will be assessed by Access Idaho for credit card transactions***(A) Company Data (Please Print)**

Business Name _____ Phone (_____) _____

*Assumed Business Name (dba) (if applicable) _____

Address _____

City/State _____ Zip Code _____

E-mail _____ Web Address _____

If incorporated, attach copy of Articles of Incorporation.

If a partnership, attach copy of agreement including dissolution language.

List corporate officers, partners or owners.

* An assumed business name is any name "other than the true and real name, or names, of the person or persons, conducting or transacting such business," Idaho Code 53-501. However, words describing the business, together with the person's last name (e.g. Smith Outfitter); generally do not constitute an assumed business name. No person is to conduct business using an assumed business name unless that name is filed with the county recorder where the business is being conducted. Operating a business without filing the assumed business name is a misdemeanor, Idaho Code 53-507, and the business cannot initiate a lawsuit, Idaho Code 53-508. The Board cannot indicate an assumed business name on a license unless a copy of the assumed business name certificate is filed with this application.

(A) Cont. – LIST OFFICER(S)

| | |
|---|----------------|
| Officer Name _____ Title _____ Phone (_____) _____ | |
| Address _____ | |
| City/State _____ | Zip Code _____ |
| <p>I certify that after having read the following* and understanding the meaning of the term “convicted,” (see below) that: <input type="checkbox"/> I HAVE <input type="checkbox"/> HAVE NEVER (check one) been convicted of or received a withheld judgment for a felony in any state, pursuant to 36-2113. I.C; paid two (2) or more forfeitures of any deposits of money or collateral with a court or administrative agency for a conviction for violation of regulations of the United States Forest Service or the Bureau of Land Management; been convicted of any violation or paid any funds to a court with respect to a citation of any state or federal fish and game laws or outfitting and guiding laws of ANY state; forfeited bail or collateral deposited to secure appearance on a charge of violation of the Fish and Game laws of the State of Idaho; been found to have committed a violation of the Idaho Outfitters and Guides Act or Board Rules, or been denied an outfitter or guide license in any state.</p> | |
| Signature of Applicant _____ | Date _____ |
| | |
| Officer Name _____ Title _____ Phone (_____) _____ | |
| Address _____ | |
| City/State _____ | Zip Code _____ |
| <p>I certify that after having read the following* and understanding the meaning of the term “convicted,” (see below) that: <input type="checkbox"/> I HAVE <input type="checkbox"/> HAVE NEVER (check one) been convicted of or received a withheld judgment for a felony in any state, pursuant to 36-2113. I.C; paid two (2) or more forfeitures of any deposits of money or collateral with a court or administrative agency for a conviction for violation of regulations of the United States Forest Service or the Bureau of Land Management; been convicted of any violation or paid any funds to a court with respect to a citation of any state or federal fish and game laws or outfitting and guiding laws of ANY state; forfeited bail or collateral deposited to secure appearance on a charge of violation of the Fish and Game laws of the State of Idaho; been found to have committed a violation of the Idaho Outfitters and Guides Act or Board Rules, or been denied an outfitter or guide license in any state.</p> | |
| Signature of Applicant _____ | Date _____ |
| <p>*A conviction includes any forfeiture of bail or bond, suspended sentence, probation or withheld judgment.</p> <p>If you marked HAVE on any of the above, you must attach an explanation (court disposition and police report for felonies), including the year and location.</p> | |

(B) A Designated Agent is Required. A Designated Agent is defined as an individual of an outfitter business who meets all qualifications of an Outfitter and *who is responsible and accountable for the conduct of the licensed Outfitter's operations*. More than one designated agent may be employed at a time.

The person(s) whose name(s) are listed below will be this outfitter's Designated Agent(s):

PLEASE PRINT ALL INFORMATION

Name _____ Phone (_____) _____

Is Designated Agent applicant qualified to guide all activities requested? ☐ Yes ☐ No

PLEASE PROVIDE TRAINING FORMS IF NEEDED FOR ACTIVITY(IES) ON DESIGNATED AGENT APPLICATION

Name _____ Phone (_____) _____

Is Designated Agent applicant qualified to guide all activities requested? ☐ Yes ☐ No

PLEASE PROVIDE TRAINING FORMS IF NEEDED FOR ACTIVITY(IES) ON DESIGNATED AGENT APPLICATION

(C) Worded Operating Area boundary requested. (PLEASE TYPE on a separate sheet)

If the operating area description of each of the activities you are applying for has not appeared on a previous license, you must send a complete standard Forest Service and/or Bureau of Land Management map at a scale of at least 3/8" to the mile that outlines or otherwise portrays the area(s) and/or activities applied for, together with a worded description using natural boundaries (i.e.; rivers, creeks, ridges) where possible of the area(s), including the Section, Township, and Range of the beginning point of said area(s) and/or activities. A map must also accompany this application. See guidelines for instructions.

Specify Fish and Game Unit(s) applied for, in which proposed activities will be conducted _____

(D) Activities (check appropriate activities you wish to be licensed for below)

HUNTING

- ☐ Antelope*
- ☐ Deer*
- ☐ Elk*
- ☐ Goat*
- ☐ Sheep*
- ☐ Moose*
- ☐ Bear*
- ☐ Cougar*
- ☐ Predators*
- ☐ Birds (specify)
- ☐ Forest Grouse
- ☐ Chukar
- ☐ Other:
- _____
- _____

BOATING

- ☐ River (attach Form OG-5)
- ☐ Power*
- ☐ Float*
- ☐ Lake* (specify)
- _____
- _____
- ☐ Reservoir* (specify)
- _____
- _____

FISHING (specify)

- ☐ Anadromous (Salmon, Steelhead)
- ☐ Fly Fishing
- ☐ Power Boat Fishing
- ☐ Float Boat Fishing
- ☐ Walk and Wade Fishing
- ☐ Incidental Fishing
- ☐ Other Species _____
- _____
- _____

RECREATION

- ☐ Trail rides
- ☐ Backpacking
- ☐ Snowmobiling*
- ☐ Technical Mountaineering/Rock Climbing*
- ☐ Level I Skiing*
- ☐ Level II Skiing*
- ☐ Mountain Bike Touring
- ☐ Photography Trips
- ☐ Survival Course
- ☐ Llama Packing

***Requires Training**

(E) Attachments & Signature

I, _____, being first fully sworn on oath, state I have completed the foregoing application and verify the truth of the information provided, that I have obtained and reviewed the current Idaho Outfitters & Guides Act and Board Rules within the last six (6) months. I certify that the following documents included with this application are true and correct:

- ☐ Operating Plan (Form OG-7)
- ☐ Financial Statement (Form OG-8)
- ☐ Private Land Manager's Sign-Off Sheet (Form OG-10) (if applicable)
- ☐ Copy of certificate for assumed business name* (dba) (if needed)
- ☐ Copy of executed Sales Agreement including list of assets being transferred and release of interest from seller (if applicable)
- ☐ Copy of lease agreement (where applicable)
- ☐ Designated Agent Application(s) (Form OG-3)
- ☐ Document Release Authorization (Form OG-14)

Applicant Signature

NOTARY (Required for all outfitter applications)

State of _____

County of _____ ss:

On this _____ day of _____, 20____, before me, the undersigned, a Notary Public in and for said state personally appeared _____, known to me to be the person whose name is subscribed to the above and foregoing instrument, and acknowledged to me that he/she executed the same.

IN WITNESS THEREOF, I have hereunto set my hand and affixed my official seal.

[SEAL]

Notary Public for the State of _____

Residing at _____

My commission expires _____