



State of Idaho  
Division of Occupational and Professional Licenses  
Outfitter and Guides Licensing Board

**BRAD LITTLE** 11341 W Chinden Blvd.  
Governor P.O. Box 83720  
**RUSSELL BARRON** Boise, ID 83720-0063  
Administrator (208) 334-3233  
dopl.idaho.gov

## DESIGNATED AGENT LICENSE APPLICATION

For: \_\_\_\_\_  
Name of Corporation/Firm/Partnership/Business Entity

- I am currently a licensed guide. My license number is \_\_\_\_\_.
- I intend to guide and have signed the affidavit/certification within this application.
- I will not be guiding but will hire qualified guides and have enclosed appropriate applications.

**A license fee of \$160 is required.**

**All first-time applications must be accompanied by an application fee of \$50.**

**FEES ARE NON-REFUNDABLE.** Please make checks and money orders payable to DOPL. All returned checks are subject to a \$20.00 fee.

1. **Legal Name** \_\_\_\_\_  
First Middle Last

2. **Mailing Address** \_\_\_\_\_  
Street/PO Box City State Zip

3. **Date of Birth** \_\_\_\_/\_\_\_\_/\_\_\_\_ (Proof of identification—a clear and readable color copy of a government-issued photo ID such as a driver's license must be attached.)

4. **Social Security No.** \_\_\_\_/\_\_\_\_/\_\_\_\_ **E-mail** \_\_\_\_\_  
(This is not a public record; required by I.C. § 73-122.)

5. **Business Phone** (\_\_\_\_) \_\_\_\_\_ **Other Phone** (\_\_\_\_) \_\_\_\_\_  
(This number is a public record.) (DOPL use only)

6. **Have you been convicted of or received a withheld judgment for a felony in any state?**  
Yes ( ) No ( )

7. **Have you paid two (2) or more forfeitures of any deposits of money or collateral with a court or administrative agency or for a conviction for violation of regulations of the United States Forest Service or the Bureau of Land Management?**  
Yes ( ) No ( )

8. **Have you been convicted of any state or federal fish and game laws or outfitting and guiding laws of ANY state?**  
Yes ( ) No ( )

9. **Have you been found to have committed a violation of the Idaho Outfitters and Guides Act or Board rules?**  
Yes ( ) No ( )

If you marked **YES** on any of the above, **you must attach an explanation, along with a copy of the court disposition and police report**, including the year and location. A **conviction** includes a finding of guilt, an entry of a guilty plea by a defendant and its acceptance by the court, or a forfeiture of bail bond or collateral deposited to secure a defendant's appearance, suspended sentence, probation or withheld judgment.

**AFFIDAVIT**

Upon oath I certify each of the following: (1) the responses and information provided in this application and in the attached addendum(s) and documentation are true and correct; (2) I am the applicant named in and who has signed this application; (3) I have reviewed and fully understand Idaho Code Title 36, Chapter 21, commonly known as the Outfitters and Guides Practice Act, as well as IDAPA 24.35.01, commonly known as the Rules of the Outfitters and Guides Licensing Board; (4) I acknowledge and agree the use of intentional misrepresentation or fraud in this application or violation of any Laws or Rules governing the profession for which I am seeking a license or authority to practice shall constitute cause sufficient for denial, suspension, cancellation or revocation of any license or authority applied for or granted to me; (5) I will provide additional or corrected information if material changes occur which would cause responses or information provided in or with this application to be inaccurate or incomplete; (6) I authorize and direct any person, agency, firm, or other entity to release, upon the request of the Idaho Division of Occupational and Professional Licenses or its authorized representative, any information, communication, report, record, statement, disclosure, or recommendation that may have bearing on my eligibility for or maintenance of the license or authority for which I am applying and hereby release and exonerate any of them from any liability of any kind resulting from the release or collection thereof; and (7) I authorize the Division of Occupational and Professional Licenses to release to any other regulatory entity in any jurisdiction any information requested about me that may otherwise be protected or confidential that may have bearing on my eligibility for or maintenance of any license or authority issued or applied for in this or any jurisdiction and hereby release and exonerate them from any liability of any kind resulting from the release thereof.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

State of \_\_\_\_\_, County of \_\_\_\_\_, ss.

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

(Seal)

\_\_\_\_\_  
Notary Public Official Signature

My Commission

Expires \_\_\_\_\_

**Guide Activities:** If guiding, you may only be licensed to guide activities for which your employing outfitter(s) is licensed.  
Check the appropriate activities below:

**Hunting**

- Deer
- Elk
- Pronghorn Antelope
- Rocky Mountain Goat
- Bighorn Sheep
- Moose
- American Black Bear
- Mountain Lion
- Wolf
- Bobcat
- Predator (Coyote, etc.)
- Birds (Specify);
  - Forest Grouse
  - Waterfowl
  - Upland Game Birds
  - Turkey (Private land only)
  - Chukar
  - Forest Grouse
  - Other: \_\_\_\_\_

**Boating**

- River: \_\_\_\_\_
- \_\_\_\_\_
- Power
- Float
- Lake(s): \_\_\_\_\_
- \_\_\_\_\_
- Reservoir(s): \_\_\_\_\_
- \_\_\_\_\_

**Fishing**

- Anadromous (specify)
  - Salmon
  - Steelhead
- Power Boat Fishing
- Float Boat Fishing
- Walk and Wade Fishing
- Incidental Fishing (Land-based)
- Other Species: \_\_\_\_\_
- \_\_\_\_\_

**Recreation**

- Trail Rides
- Backpacking
- Snowmobiling
- Technical Mountaineering
- Rock Climbing
- Cross-Country Skiing
- Backcountry Alpine Skiing
- Animal Pack Trips
- Motored Cycling
- Non-Motored Cycling
- Wagon Rides
- Sleigh Rides
- Dog Sled Rides
- All-Terrain Vehicle
- Paragliding

I wish to employ this applicant as a Designated Agent.

\_\_\_\_\_  
Print Name of Employing Outfitter

\_\_\_\_\_  
Outfitter License Number

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Employing Outfitter

For questions, please email the Board at [OGLB-Licensing@dopl.idaho.gov](mailto:OGLB-Licensing@dopl.idaho.gov).