

FEDERAL FISHERIES PERMIT APPLICATION FORM

U.S. DEPARTMENT OF COMMERCE
NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION
NATIONAL MARINE FISHERIES SERVICE
PACIFIC ISLANDS REGION

OMB Control No: 0648-xxxx

Expiration Date: xx/xx/xxxx

For Office Use:

GC _____

Issued _____

Transmit _____

2008

Mail or deliver this application to:

NMFS Pacific Islands Regional Office
ATTN: Permits
1601 Kapiolani Blvd., Suite 1110
Honolulu, Hawaii 96814-4700
Tel: (808) 944-2200

MAIN HAWAIIAN ISLANDS NON-COMMERCIAL BOTTOMFISH PERMIT

Please Print unless signature required.

APPLICANT INFORMATION (required for every applicant)

APPLICANT NAME: _____
First, Middle, & Last Name or Business Name (if owner of vessel)

DATE OF BIRTH: ____/____/____

VESSEL OWNER?: Yes / No (Check only one) If **Yes**, complete Vessel Information section below.

MAILING ADDRESS: _____
Street/PO Box City State ZIP Code

PHONE (____) _____; **CELL PHONE** (____) _____; **FAX** (____) _____

EMAIL: _____

APPLICANT SIGNATURE: _____ **DATE:** ____/____/____

Please check whether: you want the permit to be mailed to you , or you will pick it up at PIRO.

VESSEL INFORMATION (for Vessel Owners only)

VESSEL NAME: _____ ***VESSEL REGISTRATION OR USCG NO.:** _____

VESSEL CALL SIGN: _____ (if available)

DATE OF INCORPORATION (if a business): ____/____/____ Taxpayer Identification Number
(If vessel owner is a business)

Privacy Act Statement: Federal Regulations (at 50 CFR Part 665) authorize collection of this information. This information is used to verify the identity of the applicant(s) and to accurately retrieve confidential records related to federal commercial fishery permits. The primary purpose for requesting the TIN is for the collection and reporting on any delinquent amounts arising of such person's relationship with the government pursuant to the Debt Collection Improvement Act of 1996 (Public Law 104-134). Personal information is confidential and protected under the Privacy Act (5 U.S.C. 552a). Business information may be disclosed to the public.

BUSINESS CONTACT: _____ **/TITLE:** _____
(If vessel owned by a business) (First, Middle, & Last Name, if not same as vessel owner) (corporate officer, business owner, partner)

All fields required for a complete application, unless otherwise indicated. It is prohibited to file false information on any application for a fishing permit (50 CFR § 665.15(b)).

*** NOTE:** To register a vessel, you must submit a copy of the vessel's current U.S. Coast Guard Certificate of Documentation (documented vessel) or registration certificate from the Hawaii Division of Boating and Recreation (undocumented vessel) showing current vessel owner. Please submit a check or money order payable to Department of Commerce, NOAA, for the non-refundable processing fee of \$ _____. An application that is lacking required information, vessel registration or documentation, or payment will be considered incomplete. You will be notified of any deficiency. If you fail to correct the deficiency within 30 days following the date of the notice of deficiency, the application will be considered abandoned (Code of Federal Regulations, Title 50, Section 665.13).
Revised: 03/28/2008

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PAPERWORK REDUCTION ACT INFORMATION

Public reporting burden for this collection is estimated as follows: 20 minutes for main Hawaiian Islands non-commercial bottomfish permit and 2 hours for all permit denial appeals. Each burden includes time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspects of this collection of information, including suggestions for reducing this burden, to NMFS Pacific Islands Regional Administrator, 1601 Kapiolani Blvd. Suite 1110, Honolulu, Hawaii 96814-4700.

This information is being collected to ensure accurate and timely records about the persons licensed to participate in fisheries under Federal regulations in the Western Pacific Region. This will enable NMFS and the Western Pacific Fishery Management Council to (a) determine who would be affected by changes in management; (b) inform license holders of changes in fishery regulations; and (c) determine whether the objectives of the fishery program are being achieved by monitoring entry and exit patterns and other aspects of the fisheries. The information is used in analyzing and evaluating the potential impacts of regulatory changes on persons in the regulated fisheries as well as in related fisheries. Responses to the collection are required to obtain the benefit of a license for the fishery involved (ref. 50 CFR 665.13). Data provided concerning the vessel and/or business of the respondents are handled as confidential under the Magnuson-Stevens Fishery Conservation and Management Act (Sec. 402(b)). Notwithstanding any other provision of the law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.