



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

OMB Control No. 0648-0304  
Expiration Date: 06/30/2008

## HIGH SEAS FISHING PERMIT APPLICATION

### SECTION 1. VESSEL INFORMATION (please print legibly or type)

USCG DOC. OR STATE REG. NO	VESSEL NAME	RADIO CALL SIGN
CREW SIZE (INCLUDING OFFICERS)	SHAFT HORSEPOWER	REFRIGERATION TYPE: (Check only one or write in) <input type="checkbox"/> ICE <input type="checkbox"/> BRINE <input type="checkbox"/> BLAST <input type="checkbox"/> PLATE <input type="checkbox"/> TUNNEL <input type="checkbox"/> RSW OTHER (write in): _____

FISHING VESSEL TYPE (Check the box for the vessel type that best describes your vessel. Check only one)

<b>PURSE SEINERS</b> <input type="checkbox"/> 0228 – Tuna Purse Seiner <input type="checkbox"/> 0229 – Purse Seiner Other  <b>GILL NETTERS</b> <input type="checkbox"/> 0410 – Drift Netters <input type="checkbox"/> 0490 – Gill Netter Other	<b>LONGLINERS</b> <input type="checkbox"/> 0623 – Freezer Longliner <input type="checkbox"/> 0624 – Factory Longliner <input type="checkbox"/> 0626 – Tuna Longliner <input type="checkbox"/> 0627 – Longliner Other	<b>OTHER LINERS</b> <input type="checkbox"/> 0705 – Jigging Line Vessels (for squid only) <input type="checkbox"/> 0710 – Handliner <input type="checkbox"/> 0720 – Pole and Line Vessel <input type="checkbox"/> 0730 – Troller
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### SECTION 2. AUTHORIZED HIGH SEAS FISHING ACTIVITIES (Check all that apply)

Using as a reference the attached list of Authorized High Seas Fishing Activities, check those under which you intend to fish on the high seas. You must select at least one; however, check only those under which you will actually fish. You are responsible for meeting the reporting requirements for all you select.

- 50 CFR 635 – Atlantic Highly Migratory Species
- 50 CFR 660, Subpart K – Pacific Highly Migratory Species Fisheries
- 50 CFR 665, Subpart C – Western Pacific Pelagic Fisheries
- South Pacific Albacore Troll Fishing
- 50 CFR 300, Subpart C – Pacific Tuna Fisheries
  - 50 CFR 300, Subpart D – South Pacific Tuna Fisheries
  - 50 CFR 300, Subpart G – Antarctic Marine Living Resources

**SECTION 3. VESSEL OWNERSHIP INFORMATION**

<b>Managing Owner as shown on USCG Form 1270 or State Registration</b> Company Name (If vessel is incorporated)				Date Incorporation Filed			Tax Identification Number
				Month	Day	Year	
Owner Name Last	First	Middle	Suffix	Date of Birth			
				Month	Day	Year	
Mailing Address		City			State	Zip code	
Phone #		Fax #					

**SECTION 4. VESSEL OPERATOR INFORMATION**

Operators Name Last		First	Middle	Suffix	Date of Birth			
					Month	Day	Year	
Mailing Address		City			State	Zip code		
Phone #		Fax #						

**SECTION 5. VESSEL STATUS**

Has the vessel identified above flown the flag of another nation within the last three years? YES\_\_\_\_\_ NO\_\_\_\_\_.

If yes, provide the following information for each period during which the vessel operated under other than the U.S flag: Period: Beginning mm-dd-yyyy; End mm-dd-yyyy, Vessel Name, Flag, International Radio Call Sign, Homeport, Owner Name, Address, Phone, Fax; Operator Name, Address, Phone, Fax (If necessary provide additional information on a separate sheet of paper)

Has the vessel identified above, under its current name/flag, or any previous names/flags, had any permit or license suspended or revoked within the past three years? YES\_\_\_\_\_ NO\_\_\_\_\_ If yes, list and attach on a separate sheet of paper the circumstances surrounding each such instance and include an explanation of the current status of the suspension or revocation.

**SECTION 6. SIGNATURE (All applications must be signed and dated)**

By signing this application, the undersigned owner or operator of the vessel identified above, declares under penalty of law that all information in this application is true, accurate and complete. A non-refundable application fee of \$67.00 in the form of a check or money order made payable to "U.S. Department of Commerce – NOAA" must accompany each application.

Signature	Name (Print legibly or type)	Date:
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Submission of application information is mandatory in order to be considered for a permit and is used in determining if a permit should be issued. The public reporting burden for this collection of information is estimated to average 30 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining data needed, and completing and reviewing the information. Send comments regarding this burden estimate or suggestions for reducing this burden to : NMFS, Office of International Affairs, 1315 East West Highway, Silver Spring, MD 20910. Notwithstanding any other provision of 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.

Your Social Security Number (SSN) is confidential and is protected under the Privacy Act. Disclosure of your SSN is mandatory. The primary purpose for requiring the SSN and TIN is to verify the identity of individuals/entities doing business with the government as required by the Debt Collection Improvement Act of 1996 (Public Law 104-134).

## INSTRUCTIONS FOR HIGH SEAS FISHING PERMIT APPLICATION

### SECTION 1. VESSEL INFORMATION

Enter the U.S. Coast Guard Official Documentation Number assigned to the vessel. Also, attach to the application form a photocopy of the vessel's current documentation (Form CG-1270). Include copy of current decal endorsement, if necessary, as proof of existence of current documentation. If the vessel is not USCG documented, enter the vessel's current state or tribal registration number and attach a copy of the vessel's current state or tribal registration. Insure that all photocopies are completely legible.

Enter the current name of the vessel.

Enter the radio call sign currently assigned to the vessel.

Enter the number of crew members and officers the vessel normally carries. Enter shaft horsepower.

Indicate refrigeration type.

Indicate fishing vessel type that best describes your vessel. Check only one box.

### SECTION 2. AUTHORIZED HIGH SEAS FISHING ACTIVITIES

Using as a reference the attached list of Authorized High Seas Fishing Activities, indicate those under which you will fish on the high seas. Indicate only those under which you will actually fish. **You are responsible for meeting the reporting requirements for all you select.**

### SECTION 3. VESSEL OWNERSHIP INFORMATION

If the vessel is owned by a corporation, enter the company name, date of incorporation, tax identification number, business address and voice and fax phone numbers. Attach a copy of the certificate of incorporation.

If the vessel is owned by an individual or partnership, enter the names of all owners, date of birth for each owner, and address and telephone information for each owner (if more than one owner, attach required information for each additional owner on separate paper). If a partnership, attach a copy of the partnership agreement.

### SECTION 4. VESSEL OPERATOR INFORMATION

Enter the name, date of birth and address and telephone information for the vessel operator.

### SECTION 5. VESSEL STATUS

Indicate whether the vessel has flown the flag of a nation other than the United States within the last three years. If yes, provide the additional information requested.

Indicate whether the vessel, under its current or any previous names/flags, had any permit or license suspended or revoked within the past three years. If yes, provide the additional information requested.

### SECTION 6. SIGNATURE

Sign and print your name and enter the date the application was signed. Be sure to include your application fee of \$67.00 in the form of a check or money order made payable to the "U.S. Department of Commerce – NOAA."