



**INFORMATION REQUIRED FOR  
 U.S. VESSELS USED FOR COMMERCIAL FISHING FOR HIGHLY MIGRATORY SPECIES IN  
 THE WESTERN AND CENTRAL PACIFIC FISHERIES CONVENTION AREA IN AREAS  
 UNDER THE JURISDICTION OF ANY NATION OTHER THAN THE UNITED STATES**

**(Please print legibly or type)**

<b>SECTION 1. VESSEL INFORMATION</b>		
USCG DOC. OR STATE REG. NO	VESSEL NAME	RADIO CALL SIGN (Indicate whether an International Radio Call Sign has been assigned to the vessel, and if yes, specify the call sign.)  <input type="checkbox"/> No <input type="checkbox"/> Yes: _____
<b>SECTION 2. HIGH SEAS FISHING PERMITS</b> (Indicate whether a high seas fishing permit and/or a WCPFC Area Endorsement for the subject vessel has been received or applied for.)		
Has a high seas fishing permit been issued or applied for? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, you may skip Sections 3-6, provided that the information in your high seas fishing permit application is true, accurate, and complete.		
Has a WCPFC Area Endorsement been issued or applied for? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, you may skip Sections 3-11, provided that the information in your WCPFC Area Endorsement application is true, accurate, and complete.		
<b>SECTION 3.</b>		
CREW SIZE (Including officers)	SHAFT HORSEPOWER	
<b>SECTION 4. FISHING VESSEL TYPE</b> (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 Netter <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>SUPPORT VESSELS</b> <input type="checkbox"/> Fish Carrier <input type="checkbox"/> Bunker <input type="checkbox"/> Supply Other	<b>OTHER LINERS</b> <input type="checkbox"/> 0705 – Jigging Line Vessel (squid only) <input type="checkbox"/> 0710 – Handliner <input type="checkbox"/> 0720 – Pole and Line Vessel <input type="checkbox"/> 0730 – Troller  <b>OTHER TYPES OF VESSELS</b> <input type="checkbox"/> Specify: _____



**SECTION 5. VESSEL OWNERSHIP INFORMATION** (Managing Owner as shown on USCG Form 1270 or State Registration. If more than one owner, provide name, address, and telephone information on separate sheets of paper.)

Company Name (If vessel owner is incorporated)		Date of incorporation (mm/dd/yyyy): _____		
		Phone number: _____		
		Fax number: _____		
Owner Name Last	First name	Middle name	Suffix	Phone #
Mailing Address	City	State	Zip code	Fax #

**SECTION 6. PREVIOUS VESSEL FLAGS AND NAMES**

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 (If necessary provide additional information on a separate sheet of paper).

Beginning of period of validity (mm/dd/yyyy)	End of period of validity (mm/dd/yyyy)	Vessel name	International radio call sign	Homeport	Flag
1.					
2.					
3.					



**SECTION 7. FISH HOLD AND FREEZER INFORMATION**

TOTAL FISH HOLD CAPACITY \_\_\_\_\_ cubic meters or \_\_\_\_\_ short tons

REFRIGERATION/FREEZER TYPE AND CAPACITY (Check and provide numbers for all types that apply. See instructions for details.)

- ICE No. ice-making units: \_\_\_\_\_ Ice-making capacity: \_\_\_\_\_ tons/24hr
- BRINE No. chiller units: \_\_\_\_\_ Nominal size of each unit: \_\_\_\_\_ tons
- RSW No. chiller units: \_\_\_\_\_ Nominal size of each unit: \_\_\_\_\_ tons
- BLAST No. freezer units: \_\_\_\_\_ Nominal size of each unit: \_\_\_\_\_ tons
- PLATE No. freezer units: \_\_\_\_\_ Fish-freezing capacity: \_\_\_\_\_ tons/24hr
- TUNNEL No. freezer units: \_\_\_\_\_ Fish-freezing capacity: \_\_\_\_\_ tons/24hr
- OTHER: \_\_\_\_\_ No. units: \_\_\_\_\_ Fish-freezing capacity: \_\_\_\_\_ tons/24hr

**SECTION 8. FISHING METHODS** (Check each fishing gear type used or intended to be used on the vessel. Check as many boxes as apply. Check at least one box unless the vessel is a carrier, bunker, or other support vessel and is not used to harvest fish.)

- Purse Seines  Vertical Lines – Hand-operated (non-squid)  Trolling lines
- Driftnets  Vertical Lines – Mechanized (non-squid)  Poles and lines
- Drifting Longlines  Vertical Lines – Squid Jigs  Harpoons
- Other type(s) of gears (specify): \_\_\_\_\_

**SECTION 9. VESSEL COMMUNICATION TYPES AND NUMBERS** (For each communication type listed, check the “yes” or “no” box to indicate whether the communication type is available on the vessel. If yes, provide the number/address, and check or write in the Inmarsat service.)

- |                          |                          |  |
|--------------------------|--------------------------|--|
| Yes                      | No                       |  |
| <input type="checkbox"/> | <input type="checkbox"/> | Voice Inmarsat mobile number: _____  |
|                          |                          | Inmarsat service: <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> M <input type="checkbox"/> Mini-M <input type="checkbox"/> F Other: _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Fax Inmarsat mobile number: _____  |
|                          |                          | Inmarsat service: <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> M <input type="checkbox"/> Mini-M <input type="checkbox"/> F Other: _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Email Inmarsat address: _____  |
|                          |                          | Inmarsat service: <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> M <input type="checkbox"/> Mini-M <input type="checkbox"/> F Other: _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Telex Inmarsat mobile number: _____  |
|                          |                          | Inmarsat service: <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> M <input type="checkbox"/> Mini-M <input type="checkbox"/> F Other: _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Satellite telephone number (other than Inmarsat): _____  |
| <input type="checkbox"/> | <input type="checkbox"/> | Single sideband radio  |



**SECTION 10. VESSEL OPERATOR INFORMATION**

Provide the name(s) and citizenship of vessel operator(s) (i.e., the master on board the vessel).

Last name	First name	Middle name	Suffix	Country of citizenship
1.				
2.				
3.				
4.				

**SECTION 11. COLOR PHOTOGRAPH OF VESSEL** (Provide a photograph of the vessel in its current form and appearance. Indicate whether an electronic or paper photograph is being provided or indicate that a photograph has already been provided. If an electronic or paper photograph is being provided, enter the date the photograph was taken. If the vessel's form or appearance materially changes (including, but not limited to, the vessel is painted another color, the vessel is renamed, or the vessel undergoes a structural modification) or if the photograph becomes more than five years old, you must submit to NMFS a new photograph of the vessel within 15 days of the change or of the photograph becoming five years old).

<input type="checkbox"/> Electronic photograph <input type="checkbox"/> Paper photograph  Date photograph taken: _____ (mm/dd/yyyy)	<input type="checkbox"/> Photograph already provided with application for high seas fishing permit or WCPFC Area Endorsement
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**SECTION 12. AUTHORIZATIONS TO FISH** (Identify each foreign nation or foreign political entity that has permitted, licensed, or otherwise authorized, or is expected to permit, license, or authorize, the vessel to be used for fishing for highly migratory species within waters under its jurisdiction. Indicate the terms of each such authorization in the space indicated below, and submit a copy of each permit, license, or authorization with this application. Do not report in this section any permits, licenses, or endorsements issued by the United States or any federal or state agency or sub-division thereof. If necessary, provide the specified information on additional sheets of paper.)

Name of nation or political entity issuing authorization	Name of issuing authority and name or brief description of authorization type
Period of validity of authorization (mm/dd/yyyy – mm/dd/yyyy)	Specific activities authorized
Specific species for which fishing is authorized	Specific areas in which fishing is authorized
Any numerical or other unique identifier assigned to the authorization	

**SECTION 13. SIGNATURE** (All forms must be signed and dated)  
 By signing this form, the undersigned owner or operator of the vessel identified above declares under penalty of law that all information in this form is true, accurate, and complete.

Signature	Name (Print legibly or type)	Date (mm/dd/yyyy)
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Submission of the information specified on this form is mandatory. The information will be used for recordkeeping and reporting under the Western and Central Pacific Fisheries Convention Implementation Act. The public reporting burden for this collection of information is estimated to average 90 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: Regional Administrator, NMFS Pacific Islands Regional Office, 1601 Kapiolani Blvd., Suite 1110, Honolulu, HI 96814. 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.



## **INSTRUCTIONS FOR THE FORM:**

### **INFORMATION REQUIRED FOR U.S. VESSELS USED FOR COMMERCIAL FISHING FOR HIGHLY MIGRATORY SPECIES IN THE WESTERN AND CENTRAL PACIFIC FISHERIES CONVENTION AREA IN AREAS UNDER THE JURISDICTION OF ANY NATION OTHER THAN THE UNITED STATES**

The owner or operator of any U.S. vessel that is used for fishing for commercial purposes for highly migratory species in the Western and Central Pacific Fisheries Convention Area in areas under the jurisdiction of a nation other than the United States is required to provide the information specified in this form. Note that "fishing" includes receiving fish in the course of a transshipment or supporting fish-harvesting vessels, such as by bunkering or providing supplies.

For the definitions of "commercial", "fishing", "highly migratory species", Western and Central Pacific Fisheries "Convention Area", "high seas fishing permit", and "WCPFC Area Endorsement", see the regulations at 50 CFR Part 300 Subpart O.

If any of the information specified in any section of this form is provided for the subject vessel on an application for a high seas fishing permit under 50 CFR Part 300 Subpart B, or an application for a WCPFC Area Endorsement under 50 CFR Part 300 Subpart O, it need not be provided on this form, provided that the high seas fishing permit and/or WCPFC Area Endorsement is valid and the information provided therein is true, accurate, and complete. See the instructions for Section 2 below for detailed instructions.

**If there are any changes to the information provided after this form has been submitted, you must inform the National Marine Fisheries Service (NMFS) in writing of the changes within 15 days of the changes. This may be done by submitting to NMFS another copy of this form that indicates the updated information.**

**If there are any material changes to the form or appearance of the vessel after this form has been submitted, such as being painted another color, being renamed, or undergoing a structural modification, you must inform NMFS and submit a new photograph of the vessel within 15 days of the changes.**

## **SECTION 1. VESSEL INFORMATION**

Enter the U.S. Coast Guard Official Documentation Number assigned to the vessel. If the vessel is not USCG-documented, enter the vessel's current state or tribal registration number.

Enter the current name of the vessel.

Indicate whether or not an International Radio Call Sign (IRCS) has been assigned to the vessel (by the Federal Communications Commission), and if so, write in the IRCS.

## **SECTION 2. HIGH SEAS FISHING PERMITS**

Check the "yes" box to indicate that a high seas fishing permit for the subject vessel has been issued under 50 CFR Part 300 Subpart B, or if such a permit has been applied for, or if you are applying for such a permit at the same time as submitting this form. Otherwise check the "no" box. If you check "yes" you may skip Sections 3-6, provided that all the information provided in the high seas fishing permit application is true, accurate, and complete.



Check the “yes” box to indicate that a WCPFC Area Endorsement for the subject vessel has been issued under 50 CFR Part 300 Subpart O, or if such an endorsement has been applied for, or if you are applying for such an endorsement at the same time as submitting this form. Otherwise check the “no” box. If you check “yes” you may skip Sections 3-11, provided that all the information provided in the WCPFC Area Endorsement application is true, accurate, and complete.

### **SECTION 3.**

Enter the number of crew members (including officers) the vessel normally carries.

Enter the total horsepower delivered to the main propeller shaft(s).

### **SECTION 4. FISHING VESSEL TYPE**

Indicate the fishing vessel type that best describes the vessel. Check only one box. Under the category of “SUPPORT VESSELS”, “Supply Other” refers to support vessels that provide supplies, provisions, or other items aside from fuel. If the vessel type is not included in the list provided, describe the vessel type under the OTHER TYPES OF VESSELS category.

### **SECTION 5. VESSEL OWNERSHIP INFORMATION**

If the vessel is owned by a corporation, enter the company name, date of incorporation, business address, and telephone and fax numbers.

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

### **SECTION 6. PREVIOUS VESSEL FLAGS AND NAMES**

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.

### **SECTION 7. FISH HOLD AND FREEZER INFORMATION**

Enter the vessel’s total fish hold capacity, in either cubic meters or short tons.

Indicate all the refrigeration/freezer type(s) on board the vessel that are used for the catch (ignore freezers and refrigerators used only for bait and other non-catch items). For each type used, enter the number of units on board and their capacity, as follows:

If the vessel uses an *ice* system (including ice slurry), indicate the number of ice-making units on board and the total ice-making capacity, expressed as the number of short tons of ice that can be produced per 24-hour period. If the vessel uses ice produced shoreside and does not have an ice-maker on board, the “ice” box should be checked and “0” should be entered for number of ice-making units and ice-making capacity.

If the vessel uses a *brine* system, indicate the number of chiller units on board and the nominal size of each chiller unit, expressed in short tons.



If the vessel uses an *RSW* (refrigerated seawater) system, indicate the number of chiller units on board and the nominal size of each chiller unit, expressed in short tons. If seawater is cooled with ice to make an ice slurry, check the “ice” box, not the “RSW” box.

If the vessel uses a *blast* freezer system, indicate the number of freezer units on board and the nominal size of each chiller unit, expressed in short tons.

If the vessel uses a *plate* freezer system, indicate the number of freezer units on board and the total fish-freezing capacity of the system, expressed as the number of short tons of fish that can be frozen per 24-hour period.

If the vessel uses a *tunnel* freezer system, indicate the number of freezer units on board and the total fish-freezing capacity of the system, expressed as the number of short tons of fish that can be frozen per 24-hour period.

If the vessel uses a refrigeration/freezer type not listed above, indicate the refrigeration/freezer type, the number of units on board, and the total fish-freezing capacity of the system, expressed as the number of short tons of fish that can be chilled or frozen per 24-hour period.

## **SECTION 8. FISHING METHODS**

Check the boxes for all the fishing gears used or intended to be used. Check at least one box unless the vessel is a carrier, bunker, or other support vessel and it is not used to harvest fish. If the fishing gear(s) is not included in the list provided, check the box for “Other type(s) of gears” and describe the fishing gear(s).

## **SECTION 9. VESSEL COMMUNICATION TYPES AND NUMBERS**

For each communication type listed, check the “yes” or “no” box to indicate whether the communication type is available on the vessel. For each available communication type except “single sideband radio”, enter the mobile number, email address, or satellite telephone number, as appropriate. For each available communication type other than “satellite telephone number (other than Inmarsat)” and “single sideband radio”, circle the Inmarsat service used (B, C, M, Mini-M, F, or other), and in the case of “other”, specify the service.

## **SECTION 10. VESSEL OPERATOR INFORMATION**

Enter the full name and country of citizenship of the vessel operator or operators. “Operator” means the master or other individual on board and in charge of the vessel. If it is anticipated that the vessel will be operated by more than one individual, as many as four individuals may be listed.

## **SECTION 11. COLOR PHOTOGRAPH OF VESSEL**

This form must be accompanied by a full-color photograph of the vessel in its current form and appearance, in either electronic or paper format. If a photograph has already been provided to NMFS as part of an application for a high seas fishing permit or a WCPFC Area Endorsement, an additional photograph does not have to be submitted with this application, provided that the photograph meets the specifications described below. If the appearance of the vessel materially changes after this form and the photograph have been submitted (including, but not limited to, the vessel is painted another color, the vessel is renamed, or the vessel undergoes a structural modification) or if the photograph becomes more than five years old, you must inform NMFS and





submit a new photograph of the vessel within 15 days of the change or of the photograph becoming five years old.

The photograph must meet the following specifications:

The photograph must show a bow-to-stern side-view of the vessel, clearly and legibly displaying the vessel name and markings.

The photograph must have been taken within the last five years.

Paper photographs must be at least 5 by 7 inches and no greater than 8½ by 11 inches in size.

Electronic photographs must: (1) be in either jpg or tiff file formats; (2) have a resolution of at least 300 pixels per inch at a size of 5 by 7 inches; and (3) be of a file size no greater than 2 megabytes (MB).

Paper photographs may be submitted together with this form, or if the form is being submitted online or by other electronic means, paper photographs may be sent to: NMFS Pacific Islands Regional Office; International Fisheries Program; 1601 Kapiolani Blvd., Suite 1110; Honolulu, HI 96814. In that case, write clearly on the back of the photograph or a separate piece of paper the following information: "WCPFC Area – foreign jurisdictions", name of the person that signed this form, name of vessel, vessel's documentation or registration number, and date photograph was taken (mm/dd/yyyy).

Electronic photographs may be sent via email to [PIR.WCPFC@noaa.gov](mailto:PIR.WCPFC@noaa.gov). Identify the message subject as: "Vessel photograph for WCPFC Area – foreign jurisdictions" and include in the message body the following information: name of the person that signed this form, name of vessel, vessel's documentation or registration number, and date photograph was taken (mm/dd/yyyy).

## **SECTION 12. AUTHORIZATIONS TO FISH**

Identify each foreign nation or foreign political entity that has permitted, licensed, or otherwise authorized, or is expected to permit, license, or authorize, the vessel to be used for fishing for highly migratory species in the Western and Central Pacific Fisheries Convention Area within waters under its jurisdiction. Do not report in this section any permits, licenses, or endorsements issued by the United States or any federal or state agency or sub-division thereof.

For each permit, license, or authorization, provide the following information:

The name of the nation or political entity issuing the authorization.

The name of the issuing authority (that is, the particular government agency or office that issued the authorization) and the name of the authorization (for example, "Longline Fishing License") or a brief description of the authorization type (for example, "license for longline fishing").

The period of validity of the authorization (mm/dd/yyyy - mm/dd/yyyy).

The specific activities authorized, including any specific fishing gear types (e.g., harvesting fish using the longline method; receiving fish in the course of transshipments; bunkering or supplying other fishing vessels).



The specific species for which fishing is authorized, if any.

The specific areas in which fishing is authorized.

Any numerical or other unique identifier assigned to the authorization.

If necessary, provide the specified information on additional sheets of paper.

This form must be accompanied by a paper or electronic copy of each permit, license, or authorization, as follows:

Paper copies of the authorizations may be submitted together with this form, or if the form is being submitted online or by other electronic means, paper copies may be sent to: NMFS Pacific Islands Regional Office; International Fisheries Program; 1601 Kapiolani Blvd., Suite 1110; Honolulu, HI 96814. In that case, write clearly on a separate piece of paper the following information: "WCPFC Area – foreign authorization", name of the person that signed this form, name of vessel, and vessel's documentation or registration number.

Electronic copies of the authorizations may be sent via email to [PIR.WCPFC@noaa.gov](mailto:PIR.WCPFC@noaa.gov). Identify the message subject as: "WCPFC Area – foreign authorization" and include in the message body the following information: name of the person that signed this form, name of vessel, and vessel's documentation or registration number.

### **SECTION 13. SIGNATURE**

Sign and print your name and enter the date the form was signed.