

**FEDERAL FISHERIES APPLICATION FORM**

PACIFIC ISLANDS REGION  
 NATIONAL MARINE FISHERIES SERVICE  
 1601 Kapiolani Blvd., Suite 1110  
 Honolulu, HI 96814-4700  
 Ph: (808) 944-2200

OMB Control No: 0648-0490  
 Expiration Date: 04/30/2008

For Office Use
Reviewed _____
Issued _____
Transmit _____

PLEASE PRINT RESPONSES

**American Samoa Pelagic Longline Limited Access Program  
 Limited Entry Permit Application**

Version: 03/10/2008

**Application Type:** Please check the appropriate box. MAIL or DELIVER (do not fax) completed application to Pacific Islands Region.

Non-Refundable Application Processing Fee: **\$32.00**, payable by check or money order to: *Department of Commerce, NOAA*.  
 (Charged for all permit transactions except registration of vessel)

- Permit Renewal:** (renew existing permit)
- Additional Permit Issuance:** Please indicate vessel size classification:  
 **Class A** = 40' or less     **Class B** = 40.1' – 50'     **Class C** = 50.1' – 70'     **Class D** = 70' or larger
- Registration of vessel** to permit or registration of a different vessel to permit. Vessel must be the same size, or smaller, as permitted vessel size class.
- Permit transfer** (for permits registered to vessels of size Class **A, B, C, or D**):  
 Family member (Class A only)     Community organization     Person with documented participation in the American Samoa longline fishery (required in vessel size Class A for Class A only)

NAME: \_\_\_\_\_ Family Relationship: \_\_\_\_\_  
 (Print first and last names or name of community organization) (If Family member is checked)

- Permit Upgrade** (Only for permit holders with Class A permits. Please indicate vessel class size to which you are upgrading):  
 **Class B-1** = 40.1' – 50'     **Class C-1** = 50.1' – 70'     **Class D-1** = 70' or larger  
 [Retired permit number: \_\_\_\_\_] **NOTE:** This option expires 07/31/2009.

VESSEL NAME: \_\_\_\_\_ VESSEL NUMBER (USCG or AS): \_\_\_\_\_

VESSEL OWNER: \_\_\_\_\_ TAXPAYER IDENTIFICATION NO: \_\_\_\_\_  
 (Print first, middle, and last name or business name) (if a business)

DATE OF BIRTH (individual) OR INCORPORATION (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 Taxpayer Information Number is for the collection and reporting on any delinquent amounts arising out of such person's relationship to 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 MAIL ADDRESS: \_\_\_\_\_  
 (Number, street, apt.) (City/Village) (State) (Zip)

BUSINESS PHONE: (\_\_\_\_) \_\_\_\_\_ HOME PHONE: (\_\_\_\_) \_\_\_\_\_ CELL PHONE: (\_\_\_\_) \_\_\_\_\_  
 (Please include the area code for each number)

FAX: (\_\_\_\_) \_\_\_\_\_ EMAIL: \_\_\_\_\_

PERMIT APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_  
 [if applicant is an agent, see note 4 below] (Print first, middle, and last name) (Signature)

**For Permit Transfers Only.** (Current permit holder completes and signs as transferor. Receiving permit applicant fills in all above.)

PERMIT TRANSFEROR: \_\_\_\_\_ DATE: \_\_\_\_\_  
 (Current holder) (Print first, middle, and last name) (Signature)

PERMIT NUMBER WHICH IS BEING TRANSFERRED AWAY: \_\_\_\_\_

**Please submit the appropriate required documents:**

- 1) Payment for the non-refundable application processing fee, if required.
  - 2) A copy of the vessel's current U.S. Coast Guard Certificate of Documentation (documented vessel) or registration certificate from the state/territorial agency (undocumented vessel) to register a vessel to the permit.
  - 3) Documented participation in the American Samoa longline fishery if applying for an additional permit, permit upgrade, or transfer.
  - 4) If an agent is submitting the application, provide a signed letter from the permit holder authorizing the permit applicant as their agent.
- If your application is incomplete, you will be notified by PIRO. You have 30 days from the date of notification to provide required documents or your application will be considered abandoned (50 CFR 665.13(c)(2)). It is prohibited to file false information on an application for a fishing permit (50 CFR 665.16(b)).

**American Samoa  
Pelagic Longline Limited Access Program  
Limited Entry Permit Application**

SUPPLEMENTARY INFORMATION SHEET

Company/Corporation officers, owners, or partners:

NAME	MAILING ADDRESS
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Check boxes are for office use only:

- Previous ownership of longline vessel (prior to March 21, 2002): USCG COD \_\_\_\_\_ or AS VSL Reg. \_\_\_\_\_
- Vessel used to legally harvest Pacific pelagic management unit species with longline gear in the EEZ around American Samoa, and those fish were landed in American Samoa, at some time on or prior to March 21, 2002
- Currently holds Class A permit (for upgrades or additional permits)
- Current Protected Species workshop certification (for renewal)
- Fished in AS EEZ with longline: \_\_\_\_\_

Documented Evidence of Work on AS Longline Fishing Vessel:

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**PAPERWORK REDUCTION ACT INFORMATION**

Public reporting burden for this collection is estimated as follows: 45 minutes for American Samoa longline limited access additional permit issuance, renewal, transfer or upgrade. Send comments regarding this burden estimate and any other aspects of this collection of information, including suggestions for reducing this burden, to Regional Administrator, NOAA Fisheries Pacific Islands Regional Office, 1601 Kapiolani Blvd., Suite 1110, Honolulu, Hawaii 9681-4700.

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 NOAA Fisheries 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 regulatory changes on person 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 560.13). Data provided concerning the vessel and/or business of the respondents is 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 Numbers.