



NOAA National Marine Fisheries Service  
 Pacific Islands Regional Office ATTN: SFD Permits  
 1601 Kapiolani Blvd. Suite 1110  
 Honolulu, HI 96814-4700  
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OMB Control No. 0648-0463  
 Expiration Date: xx/xx/xxxx

## Special Coral Reef Ecosystem Fishing Permit Application Form

### Applicant Information (Please print legibly)

Date: \_\_\_ / \_\_\_ / \_\_\_

Full Name or Business Name: \_\_\_\_\_

Taxpayer Identification Number (EIN or SSN): \_\_\_\_\_

Date of Birth/Incorporation: \_\_\_\_\_; State of  
 Incorporation: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_  
Street Apt.# City State ZIP

Business Phone: \_\_\_\_\_ Cell: \_\_\_\_\_  
 Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**Vessel Operator?** Yes \_\_\_ ; No \_\_\_ (If Yes, complete the vessel information)

Vessel Name: \_\_\_\_\_ Home  
 Port: \_\_\_\_\_

Length (ft): \_\_\_\_\_ Net Tonnage: \_\_\_\_\_ Gross  
 Tonnage: \_\_\_\_\_

Vessel: (check one) USCG Documentation \_\_\_; State License \_\_\_;

Vessel Registration Number: \_\_\_\_\_; Radio Call Sign: \_\_\_\_\_

**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.

Is this permit solely to transship coral reef ecosystem taxa received from another vessel around the EEZ of the  
 Northwestern Hawaiian Islands, the Pacific Remote Island Areas, or any other MPA? \_\_\_\_\_

Do you agree to accommodate an observer on board while fishing, if required? \_\_\_\_\_

Does vessel have an individual Vessel Monitoring System? \_\_\_\_\_

Do you agree to submit daily log data within 30 days of returning to port? \_\_\_\_\_ or transshipment log data within 7 days  
 of returning to port? \_\_\_\_\_

**Describe your intended target and incidental species, expected catch, processing, and reason for harvesting:**

Target Species or Taxa				Expected Incidental Species or Taxa		
Species Name	Expected Catch (lb) (#, wt.)	How will it be processed? <sup>1</sup>	Why harvested? <sup>2</sup>	Species Name	Expected Catch (lb) (#, wt.)	Keep?


<sup>1</sup>Live, fresh, frozen, preserved, other

<sup>2</sup>Food, ornamental, research, other

Use another page, if necessary; total expected catch during permit period for target species required for permit approval.

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**In which EEZ Management Subarea will fishing be conducted? (check only one)**

Main Hawaiian Islands \_\_\_\_\_ American Samoa \_\_\_\_\_ Guam \_\_\_\_\_  
 \_\_\_\_\_ Guam's Southern Banks \_\_\_\_\_  
 CNMI \_\_\_\_\_ PRIA \_\_\_\_\_  
 (specify) \_\_\_\_\_  
 \_\_\_\_\_

**Fishing Gears To Be Used:**

1) \_\_\_\_\_ ; 2) \_\_\_\_\_ ; 3) \_\_\_\_\_

**Check any special exemption for which you qualify and would like to be eligible for under this permit application**

(attach description of conditions under which you apply):

Other FMP \_\_\_\_\_ Scientific Bioprospecting \_\_\_\_\_ General Indigenous \_\_\_\_\_  
 Indigenous use of live rock/coral \_\_\_\_\_ Aquaculture seed stock of coral \_\_\_\_\_

**Required Documents:**

- 1) Attach statement describing objectives and details of proposed fishing operation, estimated ecosystem, habitat and protected species impacts, and any additional information to help support approval of this application.
- 2) Attach copy of current USCG vessel documentation or state/territory vessel registration.

**It is prohibited to file false information on any application for a fishing permit (50 CFR § 665.15(b)).**

**Applicant Name (print):** \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**Paperwork Reduction Act Information**

Public reporting burden for this collection is estimated to average 120 minutes per response, including the 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 aspect of this collection of information, including suggestions for reducing this burden, to Regional Administrator, NMFS Pacific Islands Region, 1601 Kapiolani Blvd., Suite 1110, Honolulu, Hawaii, 96814-4700.

This information is being collected to provide the information needed by NMFS to regulate and monitor the coral reef fisheries and resources managed under the Fishery Management Plan for Coral Reef Ecosystems of the Western Pacific Region (FMP) and to evaluate the effectiveness of management by assessing the status of stocks and the status of the fisheries. The information provides a basis for determining whether changes in management are needed to sustain the productivity of the stocks or to respond to interactions between fishing vessels and protected species and to address economic problems in the fishery. The information is also

used to provide a basis for evaluating the magnitude and distribution of impacts resulting from changes to the regulations. Responses to the collection are required under 50 CFR 665.13. Proprietary 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 provisions 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.