

1U.S. DEPARTMENT OF COMMERCE
National Oceanic and Atmospheric Administration
NATIONAL MARINE FISHERIES SERVICE
Pacific Islands Regional Office - SFD Permits
1845 Wasp Blvd., Bldg 176
Honolulu, Hawaii 96818

OMB NUMBER: 0648-0490 Expires: 12/31/2014

(808) 725-5000 • Fax: (808) 725-5215

AMERICAN SAMOA LONGLINE LIMITED ACCESS PERMIT

	. All fields required unless noted otherwole by check or money order to: Depar			
PERMIT CLASS: _	A = vessel 40' LOA or less	B = 40.1' – 50'	C = 50.1' – 70'	D = 70' or larger
	val ermit Issuance of new or replacement vessel to peri	nit OR De-registration of	vessel from permit. (No Fee)	
Permit Transf	fer (The transferring permit holder complet as the permit applicant.)	es this section and signs, and	the person receiving the permit com	pletes the sections below and signs
TO:	Family member Community or		with documented participation in (participation in vessel size Clas	
NAME:			Relationshin:	
- TO TIME! _	Print first and last name, or name of comm	unity organization	If Family me	ember is checked
information contained	ury, I hereby declare that I, the undersigned I herein is true, correct, and complete to the	best of my knowledge.	d certify this application on behalf of	f the current permit holder and the
PERMIT TRANSFE	EROR:	nd last name	Signatur	e
DEDMIT NI IMBED	BEING TRANSFERRED:	Ta lace Hallio	Č	
VESSEL NAME: _		VESSEL UF	FICIAL NUMBER (USCG OF AS)) :
VESSEL OWNER:			RADIO CALL SIGN:	
PERMIT HOLDER:			TAXPAYER ID NUMBER	•
	First, Middle and Last Name, or	Business Name		(SSN or EIN)
PERMIT HOLDER	DATE OF BIRTH (individual) or INCO	RPORATION (business): _		
Comp	plete the Supplementary Information	Sheet on page 2 to list nan	nes and addresses of owners, pa	artners, or officers.
·	ADDRESS:		γ,	
DOSINESS MAIL A	Number, s	treet, apt. no.	City/Village	State ZIP
BUSINESS PHONE	E. ()	CELL	.: ()	
BUSINESS PHONE	(Please include the area code for each number)		()	
EMAIL:				
	ury, I hereby declare that I, the undersigned ue, correct, and complete to the best of my		d certify this application on behalf o	f the applicant and the information
APPLICANT:				DATE:
	Print first, middle initial, and last name		Signature	
notification to complet	e address at the top left of this page. If your te the application or your application will be plication form (50 CFR 665.13). It is prohibi	considered abandoned (50 C	FR 665.13). You must inform PIRO	within 15 days of any change of
accurately retrieve confidence accurately retrieve accur	: Federal Regulations (at 50 CFR Part 665) auth dential records related to federal permits. The pr ing out of such person's relationship to the gove ed under the Privacy Act (5 U.S.C. 552a). Busine	imary purpose for requesting the ⁻ rnment pursuant to the Debt Colle	Taxpayer ID Number (SSN or EIN) is for ction Improvement Act of 1996 (Public	entity of the applicant(s) and to the collection and reporting on any

SUPPLEMENTARY INFORMATION SHEET

For office use only:	
For office use only:	
Previous ownership of longline vessel: Vessel Name: USCG COD or AS Vsl Reg. Vessel used to legally harvest Pacific pelagic management unit species 1with longlin American Samoa. Fulfilled minimum harvest requirements for renewal Current Protected Species Workshop certification (for renewal)	
Certification of Limited Access Permit Transfer if applying for a transfer Documented ownership or evidence of work (Participation) on an AS longline fishing	vessel:

PAPERWORK REDUCTION ACT INFORMATION

Public reporting burden for this collection is estimated as follows: 45 minutes for American Samoa longline limited access initial permit issuance, renewal, transfer or upgrade; 2 hours for permit appeal. Send comments regarding this burden estimate and any other aspects of this collection of information, including suggestions for reducing this burden, to NMFS Pacific Islands Regional Administrator, 1845 Wasp Blvd., Bldg. 176, Honolulu, HI 96818.

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 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 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 Numbers.

Instructions for American Samoa Pelagic Longline Limited Access Permit Application

Application Type: Check which type of permit action you are applying for. Please submit a separate form for each permit. Only application for renewal, an additional permit, or vessel registration/replacement is allowed. A non-refundable application processing fee of **\$48.00** is required for an application for Renewal, Additional Permit, or Transfer.

For Permit Transfer: This section must be completed by the current permit holder(s) who is transferring the permit (transferor) to another person or business (transferee). They must write their name, their signature, and date it. The permit number being transferred must be provided. NMFS may request additional documentation to verify the transfer.

Vessel Information: Fill in the vessel name, official number (either USCG documented vessel number or state registered number for undocumented vessels), vessel owner name, and radio call sign. If the vessel has no name, please draw a line in the vessel name field.

Permit Holder Information: Fill in the name of the person or business to whom the permit will be issued. This entity will be the permit holder for the duration of the permit. Provide the taxpayer ID number: SSN for individual, or EIN (employer identification number) for a business. Fill in the date of birth of the individual or the date of incorporation for the business. If there is more than one permit holder, provide the same information for each permit holder. Any change in the name of the permit holder(s) will require a transfer.

Provide the mailing address, phone numbers, and email of the permit holder. This will be the address of record.

Permit Applicant: The person who submits the application must print his or her name and sign the form. Fill in the application date, and the applicant's title. If the applicant is not the permit holder or is not a member or officer of the business that holds the permit, the permit holder must provide a signed letter of authorization that designates the applicant as the agent.

Supplementary Information Sheet: If the permit holder is a business or partnership, list all owners, partners, and officers of the company on this sheet. Provide addresses and percent ownership for each.

Required Documents to provide with the application:

- 1) A copy of the vessel's current U.S. Coast Guard Certificate of Documentation (documented vessel) or registration certificate from a state/territorial agency (undocumented vessel) showing current vessel owner,
- 2) Payment for the non-refundable application processing fee, if required,
- 3) Documentation of harvest for Renewal,
- 4) Documentation of participation in the American Samoa longline fishery if applying for an Additional Permit or Permit Transfer,
- 5) For Transfers: A signed and notarized Certification of Limited Access Permit Transfer from the original permit holder confirming the transfer of an American Samoa longline limited access permit, and
- 6) A signed letter from the permit holder authorizing the permit applicant as the agent, if the applicant is not the permit holder.

The **vessel owner** must have a current <u>Protected Species Workshop</u> (PSW) to renew the permit. If the vessel owner is a business, an officer or authorized representative of the company must have a current PSW certificate. Contact <u>piropsw@noaa.gov</u> for workshop information.

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). You must inform PIRO within 15 days of any change of information on the application form (50 CFR 665.13). It is prohibited to file false information on an application for a fishing permit (50 CFR 665.15(b)).

Submit Complete Application to: the address printed in the upper left corner of the first page, or contact the Permits Program at piro-permits@noaa.gov for information on online renewals of American Samoa longline permits, and other permits as available.