



**U.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  
 (808) 725-5000 • Fax: (808) 725-5215

OMB Control No: 0648-0586  
 Expires: xx/xx/xxxx

## PACIFIC ISLANDS CRUSTACEAN PERMIT

Please print legibly. Items marked with \* are required. Note required documents and instructions on page 2.

\*PERMIT TYPE:  Lobster (No Fee)  
 Deepwater Shrimp (\$48.00 non-refundable application processing fee for shrimp permit only)

\*PERMIT AREA:  2. Main Hawaiian Islands  
 (Limited Entry permit required for Lobster in Permit Area 1 is no longer being issued.)  
 3. American Samoa  
 4. Pacific Remote Island Areas  
 5. Guam and Northern Mariana Islands

\*VESSEL NAME: \_\_\_\_\_ \*VESSEL OFFICIAL NO: \_\_\_\_\_  
 USC or state registration number

\*VESSEL LENGTH: \_\_\_\_\_ (feet) RADIO CALL SIGN: \_\_\_\_\_

\*VESSEL OWNER: \_\_\_\_\_ \*Taxpayer ID Number (EIN or SSN)  
 First, Middle, & Last Name or Business Name

\*DATE OF BIRTH (Individual) OR INCORPORATION (Business): \_\_\_\_\_ (MM/DD/YYYY)

\*BUSINESS CONTACT: \_\_\_\_\_ \*TITLE: \_\_\_\_\_  
 First, Middle, & Last Name, if not same as vessel owner Corporate officer, business owner, partner

\*BUSINESS MAILING ADDRESS: \_\_\_\_\_  
 Street/PO Box City State ZIP Code

\*BUSINESS PHONE (\_\_\_\_\_) \_\_\_\_\_ CELL PHONE (\_\_\_\_\_) \_\_\_\_\_ FAX (\_\_\_\_\_) \_\_\_\_\_

EMAIL: \_\_\_\_\_

Under penalty of perjury, I hereby declare that I, the undersigned, am the vessel owner, or authorized to certify this application on behalf of the vessel owner, and the information contained herein is true, correct, and complete to the best of my knowledge.

\*APPLICANT: \_\_\_\_\_ \*DATE: \_\_\_\_\_  
 Printed Name of Person Submitting Application Signature of Applicant

\*APPLICANT TITLE:  Vessel owner,  Corporate officer or partner,  Designated agent\*\*, or  Other \_\_\_\_\_  
 (Check only one)

\*Application is for a new permit?  or a renewal?  Previous permit number if renewal: \_\_\_\_\_

**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 Identification Number (EIN or SSN) 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.

## PAPERWORK REDUCTION ACT INFORMATION

Public reporting burden for this collection is estimated as follows: 15 minutes for the WP crustaceans permit application and 2 hours for all permit denial appeals. Each burden includes 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 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 Pacific Islands 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 aspects of the fisheries. The information is used in analyzing and evaluating the potential impacts of regulatory changes on persons 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 Number.

## INSTRUCTIONS FOR APPLICATION:

Please print all information legibly. Illegible writing may cause delays or errors in permit processing.

**Permit Type:** Check which permit you are applying for. You may apply for both permits with one application form, but remember to provide the fee payment for the deepwater shrimp permit. Separate permits will be issued for lobster and shrimp.

**Permit Area:** Check the area where you will be fishing. You may check more than one if you will be fishing other areas.

**Vessel Name:** Write the vessel name that is marked on the vessel and/or listed on the US Coast Guard (USCG) certificate of documentation or state/territory vessel registration form. If vessel is undocumented and has no name, please write N/A or None.

**Vessel Official No.:** Write the vessel's USCG documented number or state/territory undocumented vessel registration number.

**Vessel Length:** Write the length overall as documented by the USCG or state/territory registration.

**Radio Call Sign:** Write the call sign registered with the FCC if available.

**Vessel Owner:** Write the official vessel owner as documented by the USCG or state/territory registration

**Taxpayer ID Number:** For individuals, this is your Social Security Number (SSN); for businesses, this is the Employer Identification Number (EIN).

**Date of Birth or Incorporation:** Write the date of birth for individuals, or date of incorporation for businesses.

**Contact Person, Business Address, Business Phone and other contact information:** Write the contact person name, contact person title, vessel owner's mailing address, and vessel owner's telephone number. These will be the address and phone number of record. In addition, please provide the cell phone number, fax number, and email.

**Applicant and Date:** The vessel owner (if individual), officer or member of the business or corporation, or designated agent must print his/her name and write their signature. Write the full date (MM/DD/YYYY) when the application is signed.

**Applicant Title:** Check the role of the applicant. If the applicant is not the vessel owner or an authorized representative of the business owner of the vessel, then a written, signed, and dated letter of authorization from the vessel owner naming the applicant as a designated agent is required.

**REQUIRED DOCUMENTS:** You must submit the following with the application form.

- 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 the current vessel owner,
- 2) Payment for the non-refundable application processing fee of **\$48.00** for the shrimp permit only, check payable to **Department of Commerce, NOAA**. Write the name of the vessel and the permit type in the memo or note field on the check.
- 3) \*\*A signed letter from the permit holder authorizing the applicant as the agent, if the applicant is acting as an agent for the vessel owner.

Mail application to the address at the upper left of page 1 or deliver it to NMFS Honolulu Service Center at Pier 38. An application that is lacking required information, vessel registration or documentation, or payment will be considered incomplete. An incomplete application will be abandoned if it is not completed within 30 days after reception. 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 any application for a fishing permit (50 CFR 665.15(b)).