



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: 0648-0490
 Expires: 01/31/2018

PACIFIC ISLANDS FEDERAL FISHERIES PERMIT APPLICATION

PERMIT TYPE (Submit a separate application for each permit)

1. PELAGIC:	<input type="checkbox"/> Hawaii Longline Limited Entry Permit – Renewal or Transfer (\$52.00 Non-refundable Application Processing Fee for Hawaii longline permit only. Make checks or money orders payable to: Department of Commerce, NOAA) For Hawaii Closed Area Exemption (contact Pacific Islands Region for form) <input type="checkbox"/> Western Pacific General Longline Permit (Guam, Northern Mariana Islands, PRIA) (No Fee) <input type="checkbox"/> Western Pacific Receiving Vessel Permit (all areas) (No Fee) <input type="checkbox"/> Pacific Remote Island Areas Troll & Handline (No Fee)
<i>LOBSTER and DEEPWATER SHRIMP (Use the Western Pacific Crustacean Permit application form, OMB Control No. 0648-0586)</i>	
2. BOTTOMFISH:	<input type="checkbox"/> Guam (large vessel) <input type="checkbox"/> Pacific Remote Island Areas (No Fee) (CNMI: Use the Northern Mariana Islands Bottomfish Permit application form, OMB Control No. 0648-0584)
3. PRECIOUS CORAL:	<input type="checkbox"/> (No Fee) Permit Area (see instructions):

Please Print Legibly. All Fields Required. Note required documents in instructions on side two.

VESSEL NAME: _____ **VESSEL OFFICIAL NO:** _____

VESSEL OWNER(s): _____ **RADIO CALL SIGN:** _____
First, Middle, & Last Name or Business Name

PERMIT HOLDER(s): _____ **Taxpayer ID Number (SSN or EIN)** _____
First, Middle, & Last Name or Name of Business to be designated Permit Holder

DATE OF BIRTH (Individual) OR INCORPORATION (Business) OF PERMIT HOLDER: _____

BUSINESS CONTACT: _____ **TITLE:** _____
First, Middle, & Last Name, if not same as permit holder Corporate officer, business owner, partner

BUSINESS MAILING ADDRESS: _____
Street/PO Box City State ZIP Code

BUSINESS PHONE (____) _____ **CELL** (____) _____

EMAIL: _____

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

APPLICANT: _____ **DATE:** _____
Printed Name and **Signature** of Permit Holder, Corporate Officer, Partner, or Designated Agent

APPLICANT TITLE: Permit holder; Corporate member or officer, or partner; Designated agent; or Other _____
(Check only one)

For Hawaii Longline Permit Transfer: to be completed and signed by originating permit holder (transferer). Under penalty of perjury, I hereby declare that I, the undersigned, am the current permit holder or authorized to complete and certify this application on behalf of the current permit holder, and the information contained herein is true, correct, and complete to the best of my knowledge.

PERMIT TRANSFERER: _____ **DATE:** _____
Printed Name & Signature of Permit Holder Transferring Permit

Permit Number to be Transferred: _____

Instructions for the Pacific Islands Federal Fisheries Permit Application:

Permit Type: Check which permit you are applying for. Note: for the Hawaii longline permit, only renewal or transfer is allowed. A non-refundable application processing fee is required only for the Hawaii longline permit.

Permit Area (for Precious Coral): X-P-AS (American Samoa Exploratory Area), E-B-1 (Makapu'u Established Bed, Hawaii), E-B-2 (Au'au Channel Established Bed, HI), C-B-1 (Keahole Pt. Conditional Bed, HI), C-B-2 (Kaena Pt. Conditional Bed, HI), X-P-H (Hawaii Exploratory Area – all other HI areas except NWHI), X-P-G (Guam Exploratory Area), and X-P-CNMI (Northern Marianas Exploratory Area). See regulations at 50 CFR 665 for details.

Vessel Information: Fill in the vessel name, official number (USCG documented vessel number or registered number for undocumented vessels), radio call sign, and name of vessel owner. If the vessel has no name, please draw a line in the vessel name field. Registration of a new or replacement vessel to the Hawaii longline permit is a transfer.

Permit Holder Information: Fill in the name of the person(s) or business(es) to whom the permit will be issued. The permit will be issued to this permit holder. Provide the taxpayer ID number: SSN for individual, or EIN for a business. Fill in the date of birth of the individual or the date of incorporation for the business. Any change in the name of the permit holder for a Hawaii longline permit is a transfer.

Fill in the name of the person who will be the main contact for the permit holder, if not the same person as the permit holder, or if the permit holder is a business. Provide the mailing address, phone numbers, and email of the permit holder. This will be the address of record.

Applicant: The person who submits the application must print their name and sign the form. Fill in application date and applicant 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 designating the applicant as the agent.

For Hawaii Longline Permit Transfers: This section must be completed by the current permit holder who is transferring the permit (transferer) to another person or business (transferee). The current permit holder(s) must write their name, their signature, and date it. The permit number being transferred must be provided. If there is more than one permit holder, all permit holders must confirm the transfer. NMFS may request additional documentation to verify the transfer.

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 processing fee, if required, and
- 3) if the applicant is a designated agent, attach a signed letter from the permit holder authorizing the applicant as the agent.

The person or officer or member of the business who owns the vessel must have a current Protected Species Workshop (PSW) certificate to renew the Hawaii longline permit. Contact pirosw@noaa.gov for workshop information.

Submit Complete Application to: The address printed in the upper left corner of the first page or at the NMFS Honolulu Service Center, Pier 38, Honolulu, HI 96817 (M-F, 8 am – 4 pm). Contact the Permits Program at piro-permits@noaa.gov for information on online renewals of Hawaii longline permits, and other permits as available.

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 (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 any application for a fishing permit (50 CFR 665.15(b)).

PRIVACY ACT STATEMENT

Authority: The collection of this information is authorized under the Magnuson-Stevens Fishery Conservation and Management Act, 16 U.S.C 1801 et seq., the Western and Central Pacific Fisheries Convention Implementation Act (WCPFCIA; 16 U.S.C. 6901 et seq.), the Marine Mammal Protection Act, and the Endangered Species Act. The authority for the mandatory collection of the Tax Identification Number (TIN) is 31 U.S.C. 7701.

Purpose: In order to manage U.S. fisheries, the NOAA National Marine Fisheries Service (NMFS) requires the use of permits or registrations by participants in the United States. Information on NOAA Fisheries permit applicants and renewing holders includes vessel owner contact information, date of birth, TIN and vessel descriptive information. Permit holder information may be used as sampling frames for surveys.

Routine Uses: The Department will use this information to determine permit eligibility and to identify fishery participants. Disclosure of this information is permitted under the Privacy Act of 1974 (5 U.S.C. Section 552a), to be shared within NMFS offices, in order to coordinate monitoring and management of sustainability of fisheries and protected resources, as well as with the applicable State or Regional Marine Fisheries Commissions and International Organizations. Disclosure of this information is also subject to all of the published routine uses as identified in the Privacy Act System of Records Notice [COMMERCE/NOAA-19](#), Permits and Registrations for the United States Federally Regulated Fisheries.

Disclosure: Furnishing this information is voluntary; however, failure to provide complete and accurate information will prevent the determination of eligibility for a permit.

PAPERWORK REDUCTION ACT INFORMATION

Public reporting burden for this collection is estimated as follows: 30 minutes for Hawaii longline limited access permit renewal/transfer, WP general longline permits and receiving vessel permits; 30 minutes for Guam bottomfish large vessel permits; 30 minutes for precious coral permits (established, conditional, refugia, exploratory areas), Pacific remote island areas (PRIA) troll and handline and bottomfish permits; 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, Hawaii 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 NOAA Fisheries Service 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 permit for the fishery involved (ref. 50 CFR 665.13). Data provided concerning the proprietary 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.