



1 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) 725-5190 – piro-permits@noaa.gov

OMB Control No: 0648-0577
 Expires: 01/31/20xx

MAIN HAWAIIAN ISLANDS NON-COMMERCIAL BOTTOMFISH PERMIT

Please print legibly. Items marked with * are required. Note required documents. Non-refundable application processing fee is **\$53**. Do not mail application and payment. See instructions on next page to send application via secure email and pay fee online.

I. APPLICANT INFORMATION

***PERMIT HOLDER NAME:** _____
First, Middle, and Last Name, or Business Name (if owner of vessel)

***DATE OF BIRTH or INCORPORATION:** _____ ***TAXPAYER ID NUMBER:** _____ (SSN or EIN)

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

***EMAIL:** _____

***PHONE (_____) _____ CELL PHONE (_____) _____**

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 SIGNATURE:** _____ ***DATE:** _____

***VESSEL OPERATOR (Captain)?** Yes No (Check only one)

***VESSEL OWNER?** Yes No (Check only one) If Yes, complete Section II below.

II. VESSEL OWNERS ONLY

***VESSEL NAME:** _____ ***OFFICIAL NUMBER:** _____
DBOR registration or USCG documentation number

VESSEL RADIO CALL SIGN: _____ (if available)

***BUSINESS CONTACT:** _____ ***TITLE:** _____
(If vessel owned by a business) First, Middle, & Last Name Corporate officer, business owner, partner

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 following notification of the deficiency (50 CFR 665.13(c)(2)). You must inform PIRO within 15 days of any change of information on the application form (50 CFR 665.13(d)). It is prohibited to file false information on any application for a fishing permit (50 CFR 665.15(b)).

OMB Control No.: 0648-0577
 Expires: 01/31/20xx

This permit is required for any vessel owner or person who participates in non-commercial vessel-based fishing, landing, or transshipment of Hawaii bottomfish management unit and ecosystem component species in the Main Hawaiian Islands management subarea. Those who have current State of Hawaii Commercial Marine Licenses are exempt from this requirement. See Title 50, Code of Federal Regulations, section 665.203(a)(2) for details.

Please print legibly. All fields required unless otherwise noted.

I. Applicant Information

Permit Holder Name: Print full name: First, Middle (initials OK), Last, and suffix. If the vessel owner is a business, print the full business name. A business may not apply for an individual fisher permit; they may apply only for a vessel owner permit.

Date of Birth or Incorporation: Print date as MM/DD/YYYY.

Taxpayer ID Number: SSN for individuals, EIN for business owner of the vessel.

Mailing Address: Your current mailing address is required.

Email: Address is required.

Phone and Cell Phone: Primary phone numbers, including area code.

Applicant Signature and Date: Sign full name and print the date you signed.

Vessel Operator: Check Yes if applicant is the vessel operator/captain, No if not.

Vessel Owner: Check Yes or No. If Yes, complete Section II. For Vessel Owners Only.

II. For Vessel Owners Only

Vessel Name: Print the vessel's name, if available. If none, print **N/A**.

Official Number: Print the State of Hawaii vessel registration number as HAnnnnXX – where the nnnn is the number and the XX is the one or two character suffix, or the US Coast Guard vessel documentation number. Attach a copy of the current State vessel registration certificate or the USCG Certificate of Documentation.

Vessel Radio Call Sign: Print the radio call sign on your FCC license, if available.

Date of Incorporation: If the vessel owner is a business, corporation, LLC, etc., fill in the date of incorporation.

Business Contact and Title: Print the full name and title of the contact person for the business.

III. Submission and Payment

Do not mail application and check or send through regular email. Submit application, any required documents, and pay non-refundable application processing fee online per instructions at www.fisheries.noaa.gov/pacific-islands/commercial-fishing/apply-pacific-islands-fishing-permit.

IV. Required Documents

Vessel owners must submit a copy of the vessel's current Hawaii Division of Boating and Ocean Recreation vessel registration certificate or U.S. Coast Guard Certificate of Documentation.

The approved permit and associated documents will be emailed to you for printing and placing on your vessel.

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 following notification of the deficiency (50 CFR 665.13(c)(2)). You must inform PIRO within 15 days of any change of information on the application form (50 CFR 665.13(d)). It is prohibited to file false information on any application for a fishing permit (50 CFR 665.15(b)).

Please contact the PIRO Permits Office at (808) 725-5190 or piro-permits@noaa.gov if you have any questions.

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 (16 U.S.C. 1362 et seq.), and the Endangered Species Act (16 U.S.C. 1531 et seq.). 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, Tax Identification Number, 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 within NMFS offices under the Privacy Act of 1974 (5 U.S.C. 552a) to coordinate monitoring and management 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

A Federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with an information collection subject to the requirements of the Paperwork Reduction Act of 1995 unless the information collection has a currently valid OMB Control Number. The approved OMB Control Number for this information collection is 0648-0577. Without this approval, we could not conduct this information collection. Public reporting for this information collection is estimated to be approximately 15 minutes per permit application and 2 hours per permit denial appeal, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the information collection. All responses to this information collection are voluntary. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to the NMFS Pacific Islands Regional Office at piro-permits@noaa.gov.