



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 NUMBER: 0648-0490
 Expires: 1/31/2018

AMERICAN SAMOA LONGLINE LIMITED ACCESS PERMIT

Application Type:

Please print legibly. All fields required unless noted otherwise. Provide required documents as instructed. Non-Refundable Application Processing Fee: **\$67.00**, payable by check or money order to: **Department of Commerce, NOAA**. Fee charged for all permit transactions unless otherwise noted below.

PERMIT CLASS: ___ **A** = vessel 40' LOA or less ___ **B** = 40.1' – 50' ___ **C** = 50.1' – 70' ___ **D** = 70' or larger

___ **Permit Renewal**

___ **Additional Permit Issuance**

___ **Registration of new or replacement vessel to permit OR De-registration of vessel from permit.** (No Fee)

___ **Permit Transfer** (The transferring permit holder completes this section and signs, and the person receiving the permit completes the sections below and signs as the permit applicant.)

TO: ___ Family member ___ Community organization ___ Person with documented participation in the American Samoa longline fishery (participation in vessel size Class A for Class A only)

NAME: _____ **Relationship:** _____
Print first and last name, or name of community organization If Family member is checked

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 TRANSFEROR: _____
(Original permit holder) Print first, middle initial, and last name Signature

PERMIT NUMBER BEING TRANSFERRED: _____ **DATE:** _____

VESSEL NAME: _____ **VESSEL OFFICIAL NUMBER (USCG or 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 INCORPORATION (business): _____

Complete the **Supplementary Information Sheet** on page 2 to list names and addresses of owners, partners, or officers.

BUSINESS MAIL ADDRESS: _____
Number, street, apt. no. City/Village State ZIP

BUSINESS PHONE: (____) _____ **CELL:** (____) _____
(Please include the area code for each number)

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:** _____
Print first, middle initial, and last name Signature

Mail application to the address at the top left of this page. If your application is incomplete, you will be notified by PIRO. You have 30 days from the date of notification to complete the application 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)).

American Samoa Pelagic Longline Access Entry Permit

SUPPLEMENTARY INFORMATION SHEET

Company/Corporation officers, owners, or partners:

NAME	MAILING ADDRESS	PERCENT OWNERSHIP
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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 with longline gear in the EEZ around 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:

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. The non-refundable application processing fee 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 Protected Species Workshop (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 piro-psw@noaa.gov 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.

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: 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.