

NOTICE OF OFFICE OF MANAGEMENT AND BUDGET ACTION

Diana Hynek  
Departmental Paperwork Clearance Officer  
Office of the Chief Information Officer  
14th and Constitution Ave. NW.  
Room 6625  
Washington, DC 20230

06/23/2006

In accordance with the Paperwork Reduction Act, OMB has taken the following action on your request for approval of a new information collection received on 05/03/2006.

TITLE: Southeast Region Vessel Monitoring System (VMS)  
and Related Requirements

AGENCY FORM NUMBER(S): None

ACTION : APPROVED WITHOUT CHANGE  
OMB NO.: 0648-0544  
EXPIRATION DATE: 06/30/2009

BURDEN:	RESPONSES	HOURS	COSTS(\$,000)
Previous	0	0	0
New	10,054,892	8,393	2,237
Difference	10,054,892	8,393	2,237
Program Change		8,393	2,237
Adjustment		0	0

TERMS OF CLEARANCE: None

NOTE: The agency is required to display the OMB control number and inform respondents of its legal significance (see 5 CFR 1320.5(b)).

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OMB Authorizing Official Title

John F. Morrall III Acting Deputy Administrator, Office of  
Information and Regulatory Affairs

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# PAPERWORK REDUCTION ACT SUBMISSION

**Please read the instructions before completing this form. For additional forms or assistance in completing this form, contact your agency's Paperwork Clearance Officer. Send two copies of this form, the collection instrument to be reviewed, the supporting statement, and any additional documentation to: Office of Information and Regulatory Affairs, Office of Management and Budget, Docket Library, Room 10102, 725 17th Street NW, Washington, DC 20503.**

<p>1. Agency/Subagency originating request</p>	<p>2. OMB control number <span style="float: right;">b. <input type="checkbox"/> None</span>                  a. _____ - _____</p>
<p>3. Type of information collection (<i>check one</i>)</p> <p>a. <input type="checkbox"/> New Collection</p> <p>b. <input type="checkbox"/> Revision of a currently approved collection</p> <p>c. <input type="checkbox"/> Extension of a currently approved collection</p> <p>d. <input type="checkbox"/> Reinstatement, without change, of a previously approved collection for which approval has expired</p> <p>e. <input type="checkbox"/> Reinstatement, with change, of a previously approved collection for which approval has expired</p> <p>f. <input type="checkbox"/> Existing collection in use without an OMB control number</p> <p>For b-f, note Item A2 of Supporting Statement instructions</p>	<p>4. Type of review requested (<i>check one</i>)</p> <p>a. <input type="checkbox"/> Regular submission</p> <p>b. <input type="checkbox"/> Emergency - Approval requested by _____ / _____ / _____</p> <p>c. <input type="checkbox"/> Delegated</p>
	<p>5. Small entities                  Will this information collection have a significant economic impact on a substantial number of small entities? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
	<p>6. Requested expiration date</p> <p>a. <input type="checkbox"/> Three years from approval date b. <input type="checkbox"/> Other Specify: _____ / _____</p>
<p>7. Title</p>	
<p>8. Agency form number(s) (<i>if applicable</i>)</p>	
<p>9. Keywords</p>	
<p>10. Abstract</p>	
<p>11. Affected public (<i>Mark primary with "P" and all others that apply with "x"</i>)</p> <p>a. <input type="checkbox"/> Individuals or households d. <input type="checkbox"/> Farms</p> <p>b. <input type="checkbox"/> Business or other for-profit e. <input type="checkbox"/> Federal Government</p> <p>c. <input type="checkbox"/> Not-for-profit institutions f. <input type="checkbox"/> State, Local or Tribal Government</p>	<p>12. Obligation to respond (<i>check one</i>)</p> <p>a. <input type="checkbox"/> Voluntary</p> <p>b. <input type="checkbox"/> Required to obtain or retain benefits</p> <p>c. <input type="checkbox"/> Mandatory</p>
<p>13. Annual recordkeeping and reporting burden</p> <p>a. Number of respondents _____</p> <p>b. Total annual responses _____</p> <p>    1. Percentage of these responses collected electronically _____ %</p> <p>c. Total annual hours requested _____</p> <p>d. Current OMB inventory _____</p> <p>e. Difference _____</p> <p>f. Explanation of difference</p> <p>    1. Program change _____</p> <p>    2. Adjustment _____</p>	<p>14. Annual reporting and recordkeeping cost burden (<i>in thousands of dollars</i>)</p> <p>a. Total annualized capital/startup costs _____</p> <p>b. Total annual costs (O&amp;M) _____</p> <p>c. Total annualized cost requested _____</p> <p>d. Current OMB inventory _____</p> <p>e. Difference _____</p> <p>f. Explanation of difference</p> <p>    1. Program change _____</p> <p>    2. Adjustment _____</p>
<p>15. Purpose of information collection (<i>Mark primary with "P" and all others that apply with "X"</i>)</p> <p>a. <input type="checkbox"/> Application for benefits e. <input type="checkbox"/> Program planning or management</p> <p>b. <input type="checkbox"/> Program evaluation f. <input type="checkbox"/> Research</p> <p>c. <input type="checkbox"/> General purpose statistics g. <input type="checkbox"/> Regulatory or compliance</p> <p>d. <input type="checkbox"/> Audit</p>	<p>16. Frequency of recordkeeping or reporting (<i>check all that apply</i>)</p> <p>a. <input type="checkbox"/> Recordkeeping b. <input type="checkbox"/> Third party disclosure</p> <p>c. <input type="checkbox"/> Reporting</p> <p>    1. <input type="checkbox"/> On occasion 2. <input type="checkbox"/> Weekly 3. <input type="checkbox"/> Monthly</p> <p>    4. <input type="checkbox"/> Quarterly 5. <input type="checkbox"/> Semi-annually 6. <input type="checkbox"/> Annually</p> <p>    7. <input type="checkbox"/> Biennially 8. <input type="checkbox"/> Other (describe) _____</p>
<p>17. Statistical methods</p> <p>Does this information collection employ statistical methods</p> <p style="text-align: center;"><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>18. Agency Contact (person who can best answer questions regarding the content of this submission)</p> <p>Name: _____</p> <p>Phone: _____</p>

## 19. Certification for Paperwork Reduction Act Submissions

On behalf of this Federal Agency, I certify that the collection of information encompassed by this request complies with 5 CFR 1320.9

**NOTE:** The text of 5 CFR 1320.9, and the related provisions of 5 CFR 1320.8(b)(3), appear at the end of the instructions. *The certification is to be made with reference to those regulatory provisions as set forth in the instructions.*

The following is a summary of the topics, regarding the proposed collection of information, that the certification covers:

- (a) It is necessary for the proper performance of agency functions;
- (b) It avoids unnecessary duplication;
- (c) It reduces burden on small entities;
- (d) It used plain, coherent, and unambiguous terminology that is understandable to respondents;
- (e) Its implementation will be consistent and compatible with current reporting and recordkeeping practices;
- (f) It indicates the retention period for recordkeeping requirements;
- (g) It informs respondents of the information called for under 5 CFR 1320.8(b)(3):
  - (i) Why the information is being collected;
  - (ii) Use of information;
  - (iii) Burden estimate;
  - (iv) Nature of response (voluntary, required for a benefit, mandatory);
  - (v) Nature and extent of confidentiality; and
  - (vi) Need to display currently valid OMB control number;
- (h) It was developed by an office that has planned and allocated resources for the efficient and effective management and use of the information to be collected (see note in Item 19 of instructions);
- (i) It uses effective and efficient statistical survey methodology; and
- (j) It makes appropriate use of information technology.

If you are unable to certify compliance with any of the provisions, identify the item below and explain the reason in Item 18 of the Supporting Statement.

Signature of Senior Official or designee

Date

Agency Certification (signature of Assistant Administrator, Deputy Assistant Administrator, Line Office Chief Information Officer, head of MB staff for L.O.s, or of the Director of a Program or StaffOffice)

Signature

Date

Signature of NOAA Clearance Officer

Signature

Date

**SUPPORTING STATEMENT  
SOUTHEAST REGION VESSEL MONITORING SYSTEM (VMS)  
AND RELATED REQUIREMENTS  
OMB CONTROL NO.: 0648-xxxx**

**INTRODUCTION**

The legislative authority to collect data from the various sectors of the economy that harvest marine resources in the exclusive economic zone is the Magnuson-Stevens Fishery Conservation and Management Act (Magnuson-Stevens Act). Under this authority, the Secretary of Commerce has promulgated separate rules that require specific types of data submissions for the application process to obtain fishing permits and endorsements, and agency notification of certain activities through vessel monitoring systems (VMS).

The NOAA Fisheries Service is issuing a proposed rule, RIN 0648-AN09, to implement Amendment 18A to the Fishery Management Plan (FMP) for the Gulf of Mexico Reef Fish Fishery. Amendment 18A was prepared by the Gulf of Mexico Fishery Management Council (Council). As described below, this will require vessels to use a functional NOAA Fisheries Service approved VMS.

Additionally, the Southeast Region Permits Division is modifying its permit renewal process to include yearly renewals and a new on-line application process.

All or part of this proposed new collection will be merged later with 0648-0205, Southeast Region Permit Family of Forms.

**A. JUSTIFICATION**

**1. Explain the circumstances that make the collection of information necessary.**

The Reef Fish Fishery Management Plan (FMP) contains several area-specific regulations in which fishing is restricted or prohibited in order to protect habitat or spawning aggregations, or to reduce fishing pressure in areas that are heavily fished. Unlike size, bag, and trip limits, where the catch can be monitored onshore when a vessel returns to port, area restrictions require at-sea enforcement. However, at-sea enforcement of offshore area restrictions is difficult due to the distance from shore and the limited number of patrol vessels, resulting in a need to improve enforceability of area fishing restrictions through remote sensing methods. In addition, all fishing gears are subject to some area fishing restrictions, but longlines and fish traps have more area restrictions than other gear types. Because of the sizes of these areas and the distances from shore, the effectiveness of enforcement through over flights and at-sea interception is limited. An electronic VMS allows a more effective means to monitor vessels for intrusions into restricted areas. The proposed rule would require VMS units onboard all commercially permitted reef fish vessels, including charter vessels with commercial reef fish permits operating in the Gulf of Mexico. There are 1,145 valid commercial reef fish permits, including 24 vessels that already have VMS units onboard due to their participation in the Highly Migratory Species (HMS) fishery.

The VMS would provide effort data and would significantly aid in enforcement of areas closed to fishing. All position reports would be treated in accordance with NOAA Fisheries Service existing guidelines for confidential data. As a condition of authorized fishing for or possession of Reef Fish in or from the Gulf of Mexico EEZ, a vessel owner or operator subject to the requirements for a VMS in this section must allow NOAA Fisheries Service, the USCG, and their authorized officers and designees access to the vessel's position data obtained from the VMS. As a further aid to law enforcement officials, prior to departure for each trip, each vessel owner or operator must report their fishing activity (including but not limited to Reef Fish, Shark, Swordfish, Tuna, etc), and the gear onboard the vessel (including but not limited to Pelagic longline, bottom longline, gillnet, etc). Additionally, if fishing activity is altered during a trip, notification of the changes must be given to law enforcement. These NOAA Fisheries-defined codes for the declaration can be sent via an attached VMS terminal, via a NOAA Fisheries website, through a NOAA Fisheries call-in system or using a NOAA Fisheries interactive voice response system to NOAA Fisheries VMS personnel.

Yearly renewal of permits will assist managers in identifying fisheries where effort has been reduced due to attrition of the fleet. This will aid in the decision process of placing further restrictive measurements on fisheries in which over capitalization exists.

**2. Explain how, by whom, how frequently, and for what purpose the information will be used. If the information collected will be disseminated to the public or used to support information that will be disseminated to the public, then explain how the collection complies with all applicable Information Quality Guidelines.**

The proposed rule will stipulate that every vessel that is required to have a VMS unit must have that VMS unit on and properly functioning at all times, even when docked, and that prior to each fishing trip, or during a trip if activity changes, a report of fishing activity must be submitted to NOAA Fisheries VMS personnel. The units would be on seven days a week, 24 hours a day and would transmit once an hour unless the vessel entered a NOAA Fisheries Service defined buffer zone of one nautical mile around areas with fishing restrictions. Once a vessel enters a defined buffer zone, the VMS unit reporting rate will be increased to every 15 minutes. If the vessel then departs the buffer zone and enters the restricted area, the VMS unit reporting rate will be increased to every 10 minutes until it departs the restricted area and/or the buffer zone. The VMS unit on the vessel provides enforcement benefits to NOAA Fisheries Service and the fishery. All position reports would be treated in accordance with NOAA Fisheries Service existing guidelines for confidential data. An additional new requirement is a power-down exemption request for when boats are out of the water, i.e. for maintenance/repairs in drydock.

Permits are a standard fishery management tool which allows managers to identify the universe of participants. Permits are also used to identify areas of fishing as well as gear usage by individual fishermen. When identifying the universe of constituents whom may be affected by fishery management plans a permits query is often used to identify these individuals.

As explained in the preceding paragraphs, the information gathered has utility. NOAA Fisheries will retain control over the information and safeguard it from improper access, modification, and destruction, consistent with NOAA standards for confidentiality, privacy, and electronic information. See response #10 of this Supporting Statement for more information on confidentiality and privacy. The information collection is designed to yield data that meet all

applicable information quality guidelines. Although the information collected is not expected to be disseminated directly to the public, results may be used in scientific, management, technical or general informational publications. Should NOAA Fisheries Service decide to disseminate the information, it will be subject to the quality control measures and pre-dissemination review pursuant to Section 515 of Public Law 106-554.

**3. Describe whether, and to what extent, the collection of information involves the use of automated, electronic, mechanical, or other technological techniques or other forms of information technology.**

The VMS position reports are all transmitted electronically. Based on that information, 100 percent of the responses are collected electronically. Reporting of fishing activity can be reported one of three ways all of which use automated or electronic techniques.

The Permit Division expects to have in place by August 2006 an on-line application process (PIMS) whereby constituents will be able to download all necessary applications and forms and then mail those to the Permit Division for approval after filling out the necessary information. This is expected to move the permit application/renewal process into a 100 percent electronic technique with the exception of mailing a hard copy.

**4. Describe efforts to identify duplication.**

The Magnuson-Stevens Act's operational guidelines require each FMP to evaluate existing state and federal laws that govern the fisheries in question, and the findings are made part of each FMP. Each Fishery Management Council membership is comprised of state and federal officials responsible for resource management in their area. These two circumstances identify other collections that may be gathering the same or similar information. In addition, each FMP undergoes extensive public comment periods where potential applicants review the proposed permit application requirements. Therefore, NOAA Fisheries Service is confident it is aware of similar collections if they exist. The other information proposed to be collected is not being collected elsewhere in usable format; therefore, this data collection would not cause duplication.

The Permit Division at the Southeast Regional Office is the only location where permit information is collected and permits are issued for the Southeast Region. Therefore, NOAA Fisheries Service is confident that no similar collections exist for permit applicants and holders.

**5. If the collection of information involves small businesses or other small entities, describe the methods used to minimize burden.**

Because all applicants are considered small businesses, separate requirements based on size of business have not been developed. Only the minimum data to meet the current and future needs of NOAA Fisheries Service fisheries management and permitting programs are requested from all applicants.

**6. Describe the consequences to the Federal program or policy activities if the collection is not conducted or is conducted less frequently.**

The VMS units will provide vessel characteristics data, and enforcement information to increase

compliance in the fishery. The approved VMS is expected to provide automatic recording of positions at one hour intervals. A less frequent recording of positions would provide ineffective monitoring and not achieve the Council's intended benefits. Additionally, reporting of fishing activity will aid law enforcement in identifying closed area violations depending on the declaration of activity. In a similar manner, automatic renewals every other year are not robust enough to maintain an accurate description of the current fishery and its participation levels. This presents a problem to managers who need to understand the status of both the fishery participants and the fish stocks when drafting management plans.

**7. Explain any special circumstances that require the collection to be conducted in a manner inconsistent with OMB guidelines.**

The approved VMS is expected to provide automatic recording of positions at one hour intervals. A less frequent recording of positions would provide ineffective monitoring and not achieve the Council's intended benefits. As a result, vessel position needs to be reported and transmitted more frequently than on a quarterly basis. Similarly, the need to monitor areas where fishing is restricted to certain gear types makes it necessary to collect fishing activity information on a by-trip frequency as opposed to quarterly. The collection is otherwise consistent with OMB guidelines.

**8. Provide a copy of the PRA Federal Register notice that solicited public comments on the information collection prior to this submission. Summarize the public comments received in response to that notice and describe the actions taken by the agency in response to those comments. Describe the efforts to consult with persons outside the agency to obtain their views on the availability of data, frequency of collection, the clarity of instructions and recordkeeping, disclosure, or reporting format (if any), and on the data elements to be recorded, disclosed, or reported.**

The notice of availability of Amendment 18A, and the proposed rule to implement Amendment 18A, include a notice of and request for comments on this data collection.

Because these data collection programs are part of fishery management plans, all aspects of the programs have been reviewed by both statistical and constituent advisory committees. Furthermore, comments and suggestions from fishermen are routinely submitted, reviewed, and considered. Experience with the various programs, some of which have been operating for many years, provides a continual feedback mechanism to NOAA Fisheries Service on issues and concerns to the applicants. Amendment 18A did not raise an unusual amount of controversy during the Council development process. There are no major problems with Amendment 18A that have not been resolved.

**9. Explain any decisions to provide payments or gifts to respondents, other than remuneration of contractors or grantees.**

There are no payments or other remunerations to respondents.

**10. Describe any assurance of confidentiality provided to respondents and the basis for assurance in statute, regulation, or agency policy.**



All data that are submitted are treated as confidential in accordance with the Magnuson-Stevens Act (16 U.S.C. 1801, *et seq.*) and NOAA Administrative Order 216-100.

**11. Provide additional justification for any questions of a sensitive nature, such as sexual behavior and attitudes, religious beliefs, and other matters that are commonly considered private.**

No questions of a sensitive nature are asked.

**12. Provide an estimate in hours of the burden of the collection of information.**

The proposed rule would require reef fish vessels to have a VMS. Each of the 1,145 vessels with reef fish permits already has been counted as a respondent under 0648-0205. Each vessel is expected to have the following associated burden times: 4 hours per installation and 15 minutes for completion and submission of the statement certifying compliance with the installation and activation checklist (with the exception of the 24 vessels with VMS units already installed due to their participation in the highly migratory species (HMS) fishery), 24 seconds per day for transmittal of position reports, and two hours for annual maintenance. In addition, it is estimated that 30 % of the fleet will request a power down exemption annually, will require an additional 10 minutes of burden time per vessel. Also, it is expected that 420 permit transfers will occur within a given year; thus there will be an additional 420 respondents per year, recipients of transferred permits who must complete the installation and activation checklist. Due to the uniqueness of transfers, the time burden and cost burden for these transfers as they impact VMS requirements will be described below. Finally, there was an average of 17,722 trips taken by 1,050 vessels for the time-period 1992-2004. It is estimated that for each one of these trips it will take one minute to report fishing activity prior to departure.

**RESPONSES:**

***VMS***

First year only: 1,121 checklist completions (annualized to 374).

Annually: 1,145 vessels x 24 responses/day x 365 days = 10,030,200 + 344 power down requests = 10,030,544

Fishing report responses: 17,722

Total estimated VMS annualized responses (374 + 10,030,544 + 17,722) = **10,048,640.**

***Permits***

Annual responses: 5340 fishery permits

492 dealer permits

***Transfers***

Annual responses (checklist completions for new owners): 420 transfers

**Overall estimated annualized responses (10,048,640 + 5340 + 492 + 420) = 10,054,892.**

**HOURS:**

***VMS***

First year only:

1,121 vessels x 4 hours per vessel to install = 4,484 hours + 15 minutes per vessel per

checklist = 280 hours: 4764 hours.

Annually:

17,722 trips x 1 minute for fishing activity report = 295 hours

1,145 vessels x 2 hours per year maintenance = 2290 hours

1,145 vessels x 24 seconds per day = 2786 hours

344 vessels x 10 minutes per year for power down exemption request = 57 hours

Total: 5428 hours

First year hours will total 10,192 (4764 + 5428)

Second and third years will total 5428 each

**Total estimated annualized burden hours, averaged over three years = 7016.**

### *Permits*

There is not expected to be an increase in burden hours to constituents as the application process burden time is expected to be reduced by the availability of information and forms on-line as well as the reduction in burden hours required for the income qualification criteria documentation. Current burden time is already accounted for under 0648-0205.

## **TRANSFERS**

Only a VMS that has been approved by NOAA Fisheries Service for use in the Reef Fish Fishery of the Gulf of Mexico may be used, and it must be properly registered and activated with an approved communications provider for the new vessel. Additionally, it must be installed by a qualified marine electrician. When reinstalling and reactivating the NOAA Fisheries Service approved VMS, the new vessel owner or operator must: (1) follow procedures indicated on an installation and activation checklist, available from NOAA Fisheries Service, Office for Law Enforcement, Southeast Region, St Petersburg, FL 33701; phone: 727-824-5347; (2) submit to NOAA Fisheries Service, Office for Law Enforcement, Southeast Region, St Petersburg, FL, a statement certifying compliance with the checklist, as prescribed on the checklist; and (3) submit to NOAA Fisheries Service, Office for Law Enforcement, Southeast Region, St Petersburg, FL, a vendor-completed installation certification checklist, available from NOAA Fisheries Service, Office for Law Enforcement, Southeast Region, St Petersburg, FL 33701; phone: 727-824-5347.

An average of 420 transfers occurs in a year, broken down into three categories. The first is transfers of both the permit and the vessel to a new owner. There are an estimated 102 transfers of this type, involving only the burden of submitting a compliance checklist by the new owner, as the VMS will already be on-board and will have been installed by a qualified marine electrician. Therefore, burden time for these transfers is estimated to be 25.5 hours (102 transfers x 15 minutes for compliance checklist), with no associated cost.

Transfers involving a new permit holder using a new boat will require the new owner to acquire a certified VMS unit, have it installed, and submit the activation and compliance check list. There are 217 transfers of this type in an average year. Therefore, burden hours are estimated at 922.25 for this type of transfer (217 transfers x 4 hours for installation + 217 transfers x 15 minutes for compliance check list).

The final type of transfer involves a permit holder transferring the permit to a new vessel. This will require the owner/operator to either move the NOAA Fisheries Service approved VMS unit from the old vessel to the new one or to purchase an entirely new unit. Burden hours for this type of transfer are estimated at 429.25 hours (101 transfers x 4 hours for installation + 101 transfers x 15 minutes for compliance checklist).

**Total transfer burden hours: 1377**

**Overall total burden hours (7016 + 1377) = 8393.**

**13. Provide an estimate of the total annual cost burden to the respondents or record-keepers resulting from the collection (excluding the value of the burden hours in #12 above).**

A total of 1,121 vessels would be required to purchase and install VMS units. Equipment costs, including installation by a qualified marine electrician, range from \$1,600 to \$2,900 depending on the model and make of the unit. Yearly communication costs range from \$432 to \$617 depending on the communication provider chosen.

Total maximum estimated annualized capital/start-up costs = \$3,250,900/3 (1121 vessels x \$2900) = \$1,083,633.

Total maximum estimated annualized operations and maintenance costs = \$691,657/3 (1121 vessels x \$617) = \$230,552.

**Total maximum estimated annualized reporting/recordkeeping costs = \$1,314,185.**

**TRANSFERS**

For transfers involving the new permit owner acquiring both the permit and vessel it is assumed that a NOAA Fisheries Service VMS unit will already be on-board. For this type of transfer, there is expected to be no additional costs to the new owner. Transfers involving a new owner and a new vessel will require the purchase of a NOAA Fisheries Service approved VMS unit and installation by a qualified marine electrician. This type of transfer is expected to increase costs by \$629,300 (217 transfers x \$2900). For transfer in which the same owner transfer the permit to a new vessel costs are expected to increase by \$292,900 (101 transfers x \$2900).

Communication costs for all three types of transfers are already calculated in total communication costs for the fleet as these are not additional permits, but merely the same number of permits owned by different individuals.

**Total maximized estimated transfer reporting/recordkeeping costs (counted as capital/start-up costs) = \$922,200**

The additional costs incurred by constituents to comply with the yearly renewal are so minimal as to be considered not significant (an additional stamp).

**Overall total annualized reporting/recordkeeping costs = \$2,236,385 (\$2,005,833 capital/start-up and \$230,552 operations and maintenance costs).**

**14. Provide estimates of annualized cost to the Federal government.**

<b>Federal Costs</b>		
<b>Annual Costs</b>		
	Salary and Benefits <sup>1</sup>	\$200,000
	Internet Connection <sup>2</sup>	\$137,400
	Equipment <sup>3</sup>	\$2,000
	Software licensing	\$2,500
	Supplies	\$15,000
	Training and travel	\$5,000
	Total Annual Costs	\$361,900

<sup>1</sup> Salary and benefits for 3 program support personnel.

<sup>2</sup> Estimated at \$10/month/vessel.

<sup>3</sup> Additional server and data center.

**Start-up Costs**

Due to existing programs in the Southeast region there is no need for additional start-up costs.

The permits section is currently capable of handling the additional increase in permit renewals and no changes in cost to the government are expected.

**15. Explain the reasons for any program changes or adjustments reported in Items 13 or 14 of the OMB 83-I.**

This is a new collection covering new requirements.

**16. For collections whose results will be published, outline the plans for tabulation and publication.**

The results from this collection are not planned for statistical publication.

**17. If seeking approval to not display the expiration date for OMB approval of the information collection, explain the reasons why display would be inappropriate.**

The OMB number will be displayed.

**18. Explain each exception to the certification statement identified in Item 19 of the OMB 83-I.**

There are no exemptions to the certification statement identified in Item 19 of OMB 83-I.

**B. COLLECTIONS OF INFORMATION EMPLOYING STATISTICAL METHODS**

The collection does not employ statistical methods.

**Vessel Monitoring System (VMS) Installation and Activation Certification  
For the Reef Fish Fishery of the Gulf of Mexico**

**PLEASE COMPLETE THIS FORM BY  
PROVIDING ALL REQUESTED INFORMATION**

**Fishing Vessel (F/V) Name:** \_\_\_\_\_

**Vessel state registration number or U.S. Coast Guard documentation number:**  
\_\_\_\_\_

**Installing marine electrician or dealer (name, address, and telephone number):**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Date of Installation (mm/dd/yyyy):** \_\_\_\_\_

**VMS Mobile Transceiver Unit (MTU)**

Manufacturer name: \_\_\_\_\_

Model: \_\_\_\_\_

Manufacturer serial number (S/N): \_\_\_\_\_

Communication network serial number (ISN): \_\_\_\_\_

**VMS Mobile Communications Service Provider (MCSP)**

Communications provider name: \_\_\_\_\_

Communications ID number assigned by service provider: \_\_\_\_\_

**Did the manufacturer/vendor provide VMS MTU operating instructions?** Yes  No

**Did the manufacturer/vendor provide training on the use of the VMS MTU?** Yes  No

**Once the VMS MTU was installed, did the electrician/dealer, or the owner and/or operator of the vessel verify with NOAA OLE VMS Program personnel that position data was being received?**  
Yes  No

In accordance with 50 C.F.R. §622.9, as the owner or operator of a vessel participating in the Gulf of Mexico Reef Fish fishery, I hereby certify that the VMS unit on my vessel has been installed and the communication services activated, and receipt of position data has been verified by NOAA OLE VMS Program personnel, in compliance with the applicable procedures of this installation and activation form.

Vessel owner name: \_\_\_\_\_

Vessel owner signature: \_\_\_\_\_ Date: \_\_\_\_\_

Vessel operator name: \_\_\_\_\_

Vessel operator signature: \_\_\_\_\_ Date: \_\_\_\_\_

Submit this certification, when completed, to the NOAA/NMFS, Office for Law Enforcement, Southeast Division VMS Program, 263 13<sup>th</sup> Avenue South, Suite 109, St. Petersburg, FL 33701.

Under the provisions of the Paperwork Reduction Act of 1995 (PL 104-13) and the Privacy Act of 1974 (PL 93-579), you are advised that disclosure of the requested information is mandatory for the purpose of managing the Gulf of Mexico Reef Fish fishery. The requested information is used to ensure proper operation of the VMS unit. Confidentiality of the information provided will be treated in accordance with NOAA Administrative Order 216-100. The public reporting burdens for this collection of information are estimated as follows 15 minutes for completion and submission of the statement certifying compliance with the installation and activation checklist. The estimates of public reporting burdens for these collections of information include the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Written comments regarding the burden-hour estimates or other aspects of the collection-of-information requirements, or suggestions for reducing this burden, should be sent to Jason Rueter, NMFS, Southeast Regional Office, 263 13<sup>th</sup> Avenue South, St. Petersburg, FL 33701.

**U.S. DEPT OF COMMERCE, NOAA**  
 NMFS PERMITS BRANCH, F/SER1  
 263 13th Avenue South  
 St. Petersburg, FL 33701  
 727/824-5326 (8:00 am - 4:30 pm ET)  
<http://sero.nmfs.noaa.gov>

# FEDERAL PERMIT APPLICATION FOR AN ANNUAL DEALER PERMIT

Application ID

**FOR OFFICE USE ONLY**

**FOR OFFICE USE ONLY**

Reviewer's Initials and Date	
Check or Money Order Number	
Violation Date	
Violation Clear Date	
Expiration Date(s)	

**1. DEALER INFORMATION**

Dealer entity is (check one):  INDIVIDUAL or SOLE PROPRIETORSHIP  PARTNERSHIP  CORPORATION  OTHER \_\_\_\_\_

If the dealer is an a partnership, corporation, or other business entity provide the following name, Federal Tax ID number, and date the business was filed.

Name of Business	Federal Tax ID Number	Date business was filed

If the dealer is an Individual or Sole Proprietorship complete the following name, SSN and date of birth information:

Mr/Mrs/Ms	Last Name	First Name	Middle Name	Suffix Name
<b>SSN #</b>		<b>Date of Birth</b>		

**2. DEALER CONTACT INFORMATION**

Mailing Address	Apt/Suite #	City	State	County	Zip Code	Country
Physical Address	Apt/Suite #	City	State	County	Zip Code	Country
<input type="checkbox"/> Check box if same as Mailing Address						
				<b>Area Code</b>	<b>Phone Number</b>	

### 3. Permits

INSTRUCTIONS: Indicate which permit(s) and transaction(s) you are applying for. Find the fishery in the left column and mark the check box beside that fishery to indicate what transaction you want.

	New	Renewal	Duplicate		New	Renewal	Duplicate
Atlantic Dolphin/ Wahoo (DDW)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	South Atlantic Wreckfish (WD)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shark (SD)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	South Atlantic Rock Shrimp (RS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Domestic Swordfish (SD)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	South Atlantic Golden Crab (GC)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
South Atlantic Snapper-Grouper Excluding Wreckfish (SG)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gulf of Mexico Reef Fish (RD)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 4. COMPANY OFFICER and SHAREHOLDER INFORMATION

Complete this section only if the Dealer listed in Section 1 is a Corporation, Partnership, or other business entity. If the Dealer listed in Section 1 is an individual or sole proprietorship you may skip this section. Please copy this page as needed to provide information on all persons associated with the Dealer.

Please complete this section for **each** officer or partner associated by partnership, corporation, or other business relationship to the Dealer listed in Section 1.

**Position held:**

President/CEO  
  Vice President  
  Secretary  
  Treasurer  
  Director/Manager  
  Agent  
  Other  

Mr/Mrs/Ms	Last Name or Name of Business	First Name	Middle Name	Suffix Name
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

Mailing Address	Apt/Suite #	City	State	County	Zip Code	Country
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

Physical Address	Apt/Suite #	City	State	County	Zip Code	Country
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input type="checkbox"/> Check box if same as Mailing Address						

SSN #	Date of Birth	Area Code	Phone Number
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

**Position held:**

President/CEO  
  Vice President  
  Secretary  
  Treasurer  
  Director/Manager  
  Agent  
  Other  

Mr/Mrs/Ms	Last Name or Name of Business	First Name	Middle Name	Suffix Name
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

Mailing Address	Apt/Suite #	City	State	County	Zip Code	Country
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

Physical Address	Apt/Suite #	City	State	County	Zip Code	Country
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input type="checkbox"/> Check box if same as Mailing Address						

SSN #	Date of Birth	Area Code	Phone Number
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

### 5. RECEIVING FACILITIES

INSTRUCTIONS: List the names and street addresses for all facilities where product is received. Please copy this page as needed to provide information on all facilities where fish are received.

BUSINESS NAME		AREA CODE	TELEPHONE NUMBER			
<input type="text"/>		<input type="text"/>	<input type="text"/>			
PHYSICAL ADDRESS	CITY	STATE	COUNTY	ZIP CODE	COUNTRY	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

BUSINESS NAME		AREA CODE	TELEPHONE NUMBER			
<input type="text"/>		<input type="text"/>	<input type="text"/>			
PHYSICAL ADDRESS	CITY	STATE	COUNTY	ZIP CODE	COUNTRY	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

BUSINESS NAME		AREA CODE	TELEPHONE NUMBER			
<input type="text"/>		<input type="text"/>	<input type="text"/>			
PHYSICAL ADDRESS	CITY	STATE	COUNTY	ZIP CODE	COUNTRY	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

BUSINESS NAME		AREA CODE	TELEPHONE NUMBER			
<input type="text"/>		<input type="text"/>	<input type="text"/>			
PHYSICAL ADDRESS	CITY	STATE	COUNTY	ZIP CODE	COUNTRY	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

BUSINESS NAME		AREA CODE	TELEPHONE NUMBER			
<input type="text"/>		<input type="text"/>	<input type="text"/>			
PHYSICAL ADDRESS	CITY	STATE	COUNTY	ZIP CODE	COUNTRY	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

BUSINESS NAME		AREA CODE	TELEPHONE NUMBER			
<input type="text"/>		<input type="text"/>	<input type="text"/>			
PHYSICAL ADDRESS	CITY	STATE	COUNTY	ZIP CODE	COUNTRY	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

BUSINESS NAME		AREA CODE	TELEPHONE NUMBER			
<input type="text"/>		<input type="text"/>	<input type="text"/>			
PHYSICAL ADDRESS	CITY	STATE	COUNTY	ZIP CODE	COUNTRY	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	



## 6. State Wholesaler Licenses

Complete the following and provide a copy of each state wholesaler's license held by the dealer.

State Wholesaler License Number :	<input style="width: 90%;" type="text"/>	State Issued By	<input style="width: 90%;" type="text"/>	State Wholesaler License Number:	<input style="width: 90%;" type="text"/>	State Issued By	<input style="width: 90%;" type="text"/>
State Wholesaler License Number:	<input style="width: 90%;" type="text"/>	State Issued By	<input style="width: 90%;" type="text"/>	State Wholesaler License Number:	<input style="width: 90%;" type="text"/>	State Issued By	<input style="width: 90%;" type="text"/>
State Wholesaler License :	<input style="width: 90%;" type="text"/>	State Issued By	<input style="width: 90%;" type="text"/>	State Wholesaler License Number:	<input style="width: 90%;" type="text"/>	State Issued By	<input style="width: 90%;" type="text"/>
State Wholesaler License Number:	<input style="width: 90%;" type="text"/>	State Issued By	<input style="width: 90%;" type="text"/>	State Wholesaler License Number:	<input style="width: 90%;" type="text"/>	State Issued By	<input style="width: 90%;" type="text"/>
State Wholesaler License Number:	<input style="width: 90%;" type="text"/>	State Issued By	<input style="width: 90%;" type="text"/>	State Wholesaler License Number:	<input style="width: 90%;" type="text"/>	State Issued By	<input style="width: 90%;" type="text"/>

Other Federal Permits or licenses held (issued from Federal a permit office outside of the Southeast Region).

<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
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## 7. SIGNATURE

The undersigned certifies under penalty of perjury that the foregoing information is true and correct (28 U.S.C. section 1746; 18 U.S.C. section 1621; 18 U.S.C. section 1001).

Please note: The applicant who signs below must be the dealer identified in Section 1 unless the dealer is a partnership, corporation, or other business entity, in which the applicant must be an individual named as an officer or shareholder of the dealer as listed in Section 2.

Applicant Signature	Date
Printed Name	Position in Company (if applicable)



**Payment Reminder:**

**All applications must include payment of a non-refundable application fee in the form of a check or money order made payable to the US Treasury. The fee required is \$100.00 for the first fishery and \$25.00 for each additional fishery requested with this application.**

Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the 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 suggestions for reducing this burden to Jason Rueter, National Marine Fisheries Service, F/SER22, 263 13th Avenue South, St. Petersburg, FL 33701.

The National Marine Fisheries Service requires this information for the conservation and management of marine fishery resources. The data reported will be used to develop, implement, and monitor fishery management activities for a variety of other uses. Responses to this collection are required to obtain or retain a fisheries permit under the Magnuson - Stevens Act. Name and address information will be released via a NOAA website. All other data submitted will be handled as confidential material in accordance with NOAA Administrative Order 216-100, Protection of Confidential Fishery Statistics. Notwithstanding any other provisions of the law, no person is required to respond to, nor shall any person be subjected 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.

## **ACTIVITIES FOR WHICH PERMITS ARE REQUIRED**

<b>DOLPHIN/WAHOO</b>	Under 50 CFR 622.4, a dealer who receives Atlantic dolphin/wahoo harvested in the EEZ off the Atlantic states (Maine through the East Coast of Florida) must obtain an annual dealer permit.
<b>GOLDEN CRAB (South Atlantic)</b>	Under 50 CFR 622.4, a dealer who receives South Atlantic golden crab harvested in the EEZ off the Southern Atlantic states must obtain an annual dealer permit.
<b>REEF FISH (Gulf of Mexico)</b>	Under 50 CFR 622.4, a dealer who receives reef fish harvested from the EEZ of the Gulf of Mexico must obtain an annual dealer permit.
<b>ROCK SHRIMP (South Atlantic)</b>	Under 50 CFR 622.4, a dealer who receives rock shrimp harvested in the EEZ off the Southern Atlantic states must obtain an annual dealer permit.
<b>SNAPPER-GROUPER (South Atlantic)</b>	Under 50 CFR 622.4, a dealer who receives <b>South Atlantic</b> snapper-grouper, excluding wreckfish, harvested in the EEZ off the Southern Atlantic states must obtain an annual dealer permit.
<b>SHARK</b>	Under 50 CFR 635.4, a dealer who receives sharks from the Western North Atlantic Ocean including the Gulf of Mexico and the Caribbean Sea must obtain an annual dealer permit.
<b>SWORDFISH</b>	Under 50 CFR 635.4, a dealer who receives from a U.S. vessel a swordfish harvested from the Atlantic Ocean or Gulf of Mexico must obtain an annual domestic dealer permit.
<b>WRECKFISH (South Atlantic)</b>	Under 50 CFR 622.4(a)(4), a dealer who receives a wreckfish harvested from the <b>South Atlantic</b> must obtain an annual dealer permit.

## **INSTRUCTIONS**

**Complete the following sections, as applicable:**

**SECTION 1 & 2** Print or type the name of business and address as shown on your business license. If the applicant is a Business, print or type the Federal Tax ID number assigned to your business by the Internal Revenue Service (taxpayer ID information) if one has been assigned. If applicant is an individual, enter the Social Security Number (taxpayer ID information). If the business is corporate owned, the current Articles of Incorporation and a copy of your most recent Annual Business Report are required to support your application. If you have already submitted a copy of your Articles of Incorporations (and any amendments) and/or your most recent Annual Business Report, and these documents are still valid at the time of this application, then you may not be required to submit another set. If you are unsure whether or not you already have this documentation on file you may contact the Permits Office to verify the document status, or simply include another copy with this application.

As a reminder, permits will not be issued if the corporation is in an INACTIVE status. If your business is not incorporated, then submit a copy of your local business license.

**SECTION 3** Select the fisheries for which you are applying.

**SECTION 4** If the application is for a dealer that a corporation, partnership, or other business entity then information on the dealer's officers/ shareholders is required. If additional space is needed, please photocopy the blank page as many times as is necessary to provide information on all officers/shareholders associated with the dealer.

**SECTION 5** If fish are received at a location different from the dealer's address listed in section 2, complete this section for each physical location where fish are received. Note: A post Office Box is not acceptable as a physical location where fish are received.

**SECTION 6** Provide the state wholesale license for each state in which the dealer has a facility. Also, please provide the permit number of any Federal Permits issued, for example, a dealer permit issued by the NMFS Northeast Regional Office (NERO).

**SECTION 7** The application must be signed and data. If the dealer is a corporation, partnership, or other business entity then the applicant must be an officer or shareholder of the dealer, as indicated on the Articles of Incorporations (and any amendments) and/or your most recent Annual Business Report.

**Additional Instructions:**

1. Mail the completed application, copy of state wholesaler's license (if required) for each state in which you operate, a copy of the Articles of Incorporation (and any amendments), a copy of the most current Annual Business Report as filed with the state in which the business is incorporated, and a check or money order made payable to the U.S. TREASURY to: **National Marine Fisheries Service (F/SER1), 263 13<sup>th</sup> Avenue South., St. Petersburg, FL 33701.** Questions may be telephoned to 727/824-5326 between 8 am - 4:30pm ET. If you would like your permit and associated documents returned to you via overnight mail, enclose a completed **FEDERAL EXPRESS** air bill, complete with your delivery address, telephone, and your FEDEX account number or credit card number.

**States required to submit wholesale license:** Alabama, California, Florida, Georgia, Hawaii, Louisiana, Massachusetts, Maryland, Maine, Pennsylvania, Rhode Island, South Carolina, Texas, U.S. Virgin Islands and Washington.

If you have already submitted a copy of your Articles of Incorporations (and any amendments), your most recent Annual Business Report, and/or your valid state wholesaler's license and these documents are still valid at the time of this application, than you may not be required to submit another set. If you are unsure whether or not you already have documentation on file, which could be associated with this application, you may contact the Permits Office to verify the document status, or simply include another copy with this application.

2. The application fee is **\$100** for the first fishery and **\$25** for each additional fishery and is **non-refundable**. A check or money order payable to the **U.S. TREASURY** must accompany each application. The fee for a replacement permit is **\$18**. Complete all lines or sections that apply for the type(s) of fishery(ies) requested. Select only those your business will need. **Certain fisheries require mandatory reporting requirements.**

**In accordance with Federal regulations, any change in your permit information must be reported to the NMFS Regional Administrator within 30 days of the change.**

**KNOWINGLY SUPPLYING FALSE INFORMATION FOR THE PURPOSE OF OBTAINING A DEALER PERMIT IS A VIOLATION OF FEDERAL LAW PUNISHABLE BY A FINE AND/OR IMPRISONMENT.**

Public reporting burden for this collection of information is estimated to average 5 minutes per response, including the 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 aspect of this collection of information, including suggestions for reducing this burden to Jason Rueter, Southeast Regional Office, National Marine Fisheries Service, 263 13<sup>th</sup> Avenue South., St. Petersburg, FL 33701.

The National Marine Fisheries Service requires this information for the conservation and management of marine fishery resources. The data reported will be used to develop, implement, and monitor fishery management activities for a variety of other uses. Responses to this collection are required to obtain or retain a fisheries permit under the Magnuson - Stevens Act. Confidential name and address information will be released via a NOAA Fisheries Website for informational purposes. All other data submitted will be handled as confidential material in accordance with NOAA Administrative Order 216-100, Protection of Confidential Fishery Statistics. Notwithstanding any other provisions 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.

**U.S. DEPT OF COMMERCE, NOAA**  
 NMFS PERMITS BRANCH, F/SER1  
 263 13th Avenue South  
 St. Petersburg, FL 33701  
 727/824-5326 (8:00 am - 4:30 pm ET)  
 http://sero.nmfs.noaa.gov

# FEDERAL PERMIT APPLICATION FOR VESSELS FISHING IN THE EXCLUSIVE ECONOMIC ZONE (EEZ)

Application ID

**FOR OFFICE USE ONLY**

**FOR OFFICE USE ONLY**

Reviewer's Initials and Date	
Check or Money Order Number	
Violation Date	
Violation Clear Date	
Non Compliance Hold Date	
Non Compliance Cleared Date	
Expiration Date(s)	

**A COPY of your current (not expired) USCG Certificate of Documentation or, if the vessel is not documented, your state vessel registration must be on file or accompany this application. Do not send your original.**

## 1. VESSEL INFORMATION

<p>OFFICIAL NUMBER FROM USCG CERTIFICATE OF DOCUMENTATION (if applicable)</p> <div style="border: 1px solid black; height: 25px; width: 100%;"></div> <p>STATE REGISTRATION NUMBER (if applicable)</p> <div style="border: 1px solid black; height: 25px; width: 100%;"></div> <p>VESSEL NAME</p> <div style="border: 1px solid black; height: 25px; width: 100%;"></div> <p>HULL IDENTIFICATION or IMO NUMBER</p> <div style="border: 1px solid black; height: 25px; width: 100%;"></div> <p>HAILING PORT CITY</p> <div style="border: 1px solid black; height: 25px; width: 100%;"></div> <p>HAILING PORT COUNTY                      HAILING PORT STATE</p> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; width: 45%; height: 25px;"></div> <div style="border: 1px solid black; width: 45%; height: 25px;"></div> </div>	<p>YEAR BUILT</p> <div style="border: 1px solid black; height: 25px; width: 100%;"></div>	<p>LENGTH (FEET)</p> <div style="border: 1px solid black; height: 25px; width: 100%;"></div>	<p>TOTAL HORSEPOWER</p> <div style="border: 1px solid black; height: 25px; width: 100%;"></div>
<b>USCG DOCUMENTED VESSELS ONLY</b>			
<p>GROSS TONS</p> <div style="border: 1px solid black; height: 25px; width: 100%;"></div>		<p>NET TONS</p> <div style="border: 1px solid black; height: 25px; width: 100%;"></div>	
<p>HOLD CAPACITY (Pounds of Harvest)</p> <div style="border: 1px solid black; height: 25px; width: 100%;"></div>			
<p><b>HULL MATERIAL</b></p> <p><input type="checkbox"/> FIBERGLASS</p> <p><input type="checkbox"/> STEEL</p> <p><input type="checkbox"/> WOOD</p> <p><input type="checkbox"/> CEMENT</p> <p><input type="checkbox"/> OTHER _____</p>	<p><b>FUEL TYPE</b></p> <p><input type="checkbox"/> DIESEL</p> <p><input type="checkbox"/> GASOLINE</p> <p><input type="checkbox"/> OTHER _____</p> <p>TOTAL FUEL CAPACITY (GALLONS)</p> <div style="border: 1px solid black; height: 25px; width: 100%;"></div>	<p><b>PRODUCT STORAGE (check all that apply)</b></p> <p><input type="checkbox"/> ICE</p> <p><input type="checkbox"/> FREEZER</p> <p><input type="checkbox"/> LIVE WELL</p> <p><input type="checkbox"/> OTHER _____</p>	
<p>PASSENGER CAPACITY DATA FOR CHARTER/ HEADBOAT VESSELS</p> <p><input type="checkbox"/> UNINSPECTED VESSEL - "6-PACK"</p> <p><input type="checkbox"/> USCG INSPECTED VESSEL (Specify passenger Capacity as listed on the USCG Certificate of Inspection) <span style="float: right; border: 1px solid black; width: 50px; height: 25px; display: inline-block;"></span></p>			
<p>This vessel is best described as:</p> <p><input type="checkbox"/> Commercial Fishing    <input type="checkbox"/> Charter    <input type="checkbox"/> Headboat</p>			

## 2. PERMITS

INSTRUCTIONS: Indicate which permit(s) and transaction(s) you are applying for. Find the fishery in the left column and mark the check box beside that fishery to indicate what transaction you want.

### OPEN ACCESS COMMERCIAL PERMITS

FISHERY	NEW	RENEWAL	DUPLICATE
COMMERCIAL ATLANTIC DOLPHIN/ WAHOO (ADW)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SPINY LOBSTER TAILING (LT)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SPINY LOBSTER (LC) (Not required for the EEZ off Florida)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SOUTH ATLANTIC ROCK SHRIMP (RS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SPANISH MACKEREL (SM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SOUTH ATLANTIC PENAEID SHRIMP (SPA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ROYAL RED SHRIMP ENDORSEMENT TO GULF OF MEXICO SHRIMP (SPR)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GULF OF MEXICO SHRIMP (SPG)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### OPEN ACCESS CHARTER/HEADBOAT PERMITS

FISHERY	NEW	RENEWAL	DUPLICATE
SOUTH ATLANTIC CHARTER/ HEADBOAT FOR SNAPPER-GROUPER (SC)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SOUTH ATLANTIC CHARTER/ HEADBOAT FOR COASTAL MIGRATORY PELAGICS (CHS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ATLANTIC CHARTER/ HEADBOAT FOR DOLPHIN/ WAHOO (CDW)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### LIMITED ACCESS/MORATORIUM CHARTER/ HEADBOAT and COMMERCIAL PERMITS

FISHERY	TRANSFER	RENEWAL	DUPLICATE
GULF OF MEXICO CHARTER/HEADBOAT FOR COASTAL MIGRATORY PELAGIC FISH (CHG)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GULF OF MEXICO CHARTER/HEADBOAT FOR REEF FISH (RCG)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HISTORICAL CAPTAIN GULF OF MEXICO CHARTER/HEADBOAT FOR COASTAL MIGRATORY PELAGIC FISH (HCHG)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HISTORICAL CAPTAIN GULF OF MEXICO CHARTER/HEADBOAT FOR REEF FISH (HRCG)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
KING MACKEREL (KM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GILLNET FOR KING MACKEREL (GN)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GULF OF MEXICO REEF FISH (RR, RRE)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RED SNAPPER CLASS 1 LICENSE - 2000 POUND (L1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RED SNAPPER CLASS 2 LICENSE - 200 POUND (L2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SOUTH ATLANTIC ROCK SHRIMP LIMITED ENTRY AREA ENDORSEMENT (RSE)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SOUTH ATLANTIC UNLIMITED SNAPPER-GROUPER (EXCLUDING WRECKFISH) (SG1, ST1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SOUTH ATLANTIC 225 LB TRIP LIMIT SNAPPER-GROUPER (EXCLUDING WRECKFISH) (SG2, ST2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SWORDFISH DIRECTED (SFD)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SWORDFISH HANDGEAR (SFH)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SWORDFISH INCIDENTAL (SFI)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SHARK DIRECTED (SKD)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SHARK INCIDENTAL (SKI)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 3. VESSEL OWNER AND LESSEE INFORMATION

Please copy this page as needed to provide information on all persons or businesses that own or lease the vessel listed in Section 1.

- 1) Please complete this section for each owner of the vessel as shown on the Coast Guard Documentation or, if not documented, on the state registration certificate. If the owner is a business or partnership, enter the Federal ID number and date the business was formed or partnership was filed. If the owner is an individual, enter the Social Security Number.
- 2) Complete the Additional Owner or Lessee section for a second joint owner if the vessel is owned by more than one owner, or if the vessel is leased, for the entity that is leasing the vessel from the vessel owner. If you need more spaces, copy the blank form or provide the required information on a separate sheet of paper.
- 3) Place an "X" in the Mailing Recipient block to indicate who will receive the permit and all related information. Please only mark one box.
- 4) If the vessel is operated under a lease or other written management agreement that bestows control over the destination, function or operation of the vessel to a person other than the vessel owner (as stated on the Coast Guard Documentation or state registration), you must submit information on each lessee. If you need more spaces for additional lessees, copy the blank form or provide the required information on a separate sheet of paper.

Vessel Owner as shown on the USCG Certificate of Documentation,  
or for undocumented vessels, the State Registration; and/or Vessel Lessee Information

This entity is a vessel OWNER <input type="checkbox"/> or vessel LESSEE <input type="checkbox"/> (For lessees only) LEASE START DATE: <input style="width: 100px;" type="text"/> LEASE EXPIRATION DATE: <input style="width: 100px;" type="text"/>							
Check one <input type="checkbox"/> INDIVIDUAL or SOLE PROPRIETORSHIP <input type="checkbox"/> JOINT OWNERSHIP <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> CORPORATION <input type="checkbox"/> OTHER _____							
<input type="checkbox"/> Mailing Recipient - Mark this box only if you want this entity to receive all mail concerning this permit.							
<b>Mr/Mrs/Ms</b>	<b>Last Name or Name of Business</b>	<b>First Name</b>	<b>Middle Name</b>	<b>Suffix Name</b>			
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>			
<b>Mailing Address</b>		<b>Apt/Suite #</b>	<b>City</b>	<b>State</b>	<b>County</b>	<b>Zip Code</b>	<b>Country</b>
<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<b>Physical Address</b>		<b>Apt/Suite #</b>	<b>City</b>	<b>State</b>	<b>County</b>	<b>Zip Code</b>	<b>Country</b>
<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input type="checkbox"/> Check box if same as Mailing Address							
<b>Federal ID # or SSN #</b>	<b>Date of Birth/business filed</b>	<b>Area Code</b>	<b>Phone Number</b>				
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>				
Income Qualifier: If this entity is the income qualifier for any permits applied for in this application, indicate below to which fishery the income applies.							
<input type="checkbox"/> Commercial King Mackerel <input type="checkbox"/> Commercial Spiny Lobster <input type="checkbox"/> Spanish Mackerel <input type="checkbox"/> Reef Fish							

Second Vessel Owner as shown on the USCG Certificate of Documentation or State Registration, or  
Vessel Lessee

This entity is a vessel OWNER <input type="checkbox"/> or vessel LESSEE <input type="checkbox"/> (For lessees only) LEASE START DATE: <input style="width: 100px;" type="text"/> LEASE EXPIRATION DATE: <input style="width: 100px;" type="text"/>							
Check one <input type="checkbox"/> INDIVIDUAL or SOLE PROPRIETORSHIP <input type="checkbox"/> JOINT OWNERSHIP <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> CORPORATION <input type="checkbox"/> OTHER _____							
<input type="checkbox"/> Mailing Recipient - Mark this box only if you want this entity to receive all mail concerning this permit.							
<b>Mr/Mrs/Ms</b>	<b>Last Name or Name of Business</b>	<b>First Name</b>	<b>Middle Name</b>	<b>Suffix Name</b>			
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>			
<b>Mailing Address</b>		<b>Apt/Suite #</b>	<b>City</b>	<b>State</b>	<b>County</b>	<b>Zip Code</b>	<b>Country</b>
<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<b>Physical Address</b>		<b>Apt/Suite #</b>	<b>City</b>	<b>State</b>	<b>County</b>	<b>Zip Code</b>	<b>Country</b>
<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input type="checkbox"/> Check box if same as Mailing Address							
<b>Federal ID # or SSN#</b>	<b>Date of Birth/business filed</b>	<b>Area Code</b>	<b>Phone Number</b>				
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>				
Income Qualifier: If this entity is the income qualifier for any permits applied for in this application, indicate below to which fishery the income applies.							
<input type="checkbox"/> Commercial King Mackerel <input type="checkbox"/> Commercial Spiny Lobster <input type="checkbox"/> Spanish Mackerel <input type="checkbox"/> Reef Fish							

#### 4. OFFICER/SHAREHOLDER INFORMATION FOR ENTITIES THAT OWN OR LEASE THE VESSEL

Please copy this page as needed to provide information on all persons or businesses that own or lease this vessel.

1) Please complete this section for **each** officer or partner associated by partnership, corporation, or other business relationship to a vessel owner or lessee listed in section 3.

Owner or lessee of the vessel:  Owner  Lessee

Business name:

Federal Tax ID #

All individuals associated with the above-named vessel owner or lessee must be included in this application. Photocopy this page or attach additional sheets as necessary to list all officers, directors, shareholders, and registered agents of the business. Provide names, Social Security Numbers, addresses, phone number, date of birth, and position held in business.

**Position held**  
 President/CEO  Vice President  Secretary  Treasurer  Director/Manager  Agent  Other

Mr/Mrs/Ms	Last Name or Name of Business	First Name	Middle Name	Suffix Name
<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>

Mailing Address	Apt/Suite #	City	State	County	Zip Code	Country
<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>

Physical Address	Apt/Suite #	City	State	County	Zip Code	Country
<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>

Check box if same as Mailing Address

SSN #	Date of Birth	Area Code	Phone Number
<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>

Income Qualifier: If this entity is the income qualifier for any permits applied for in this application, indicate below to which fishery the income applies.  
 Commercial King Mackerel  Commercial Spiny Lobster  Spanish Mackerel  Reef Fish

**Position held**  
 President/CEO  Vice President  Secretary  Treasurer  Director/Manager  Agent  Other

Mr/Mrs/Ms	Last Name or Name of Business	First Name	Middle Name	Suffix Name
<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>

Mailing Address	Apt/Suite #	City	State	County	Zip Code	Country
<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>

Physical Address	Apt/Suite #	City	State	County	Zip Code	Country
<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>

Check box if same as Mailing Address

SSN #	Date of Birth	Area Code	Phone Number
<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>

Income Qualifier: If this entity is the income qualifier for any permits applied for in this application, indicate below to which fishery the income applies.  
 Commercial King Mackerel  Commercial Spiny Lobster  Spanish Mackerel  Reef Fish

## 5. HISTORICAL CAPTAIN, RED SNAPPER CLASS 1 LICENSE QUALIFIER, AND/OR OTHER INCOME QUALIFIERS

Please copy this page as needed to provide information on persons who are Historical Captains; Red Snapper Class 1 License Qualifiers; and Income Qualifiers/Operators who are not also a vessel owner or lessee, or related through business association to the vessel owner or lessee, as listed in Section 3 or Section 4 of this application.

Please complete this section of the application only if you are applying for:

- \* A Gulf of Mexico Charter/Headboat permit with a Historical Captain provision,
- \* A Red Snapper Class 1 License that you have leased from a Red Snapper Class 1 License qualifier, or
- \* A King Mackerel, Spanish Mackerel, Reef Fish, or Commercial Spiny Lobster permit for which you have met the income qualification requirement by using the fishing income of an operator who is neither a vessel owner or lessee as listed in Section 3 of this application, nor is the operator an officer or a shareholder of a business that owns or leases the vessel, as listed in Section 4 of this application.

For all other applications, this page should be blank.

This entity is a (check all that apply):

- Historical Captain for Gulf of Mexico Charter/Headboat for Reef Fish  
 Historical Captain for Gulf of Mexico Charter/headboat for Coastal Migratory Pelagic Fish  
 Red Snapper Class 1 License Qualifier  
 Income Qualifier for: (check all that apply) 
  Commercial King Mackerel 
  Commercial Spiny Lobster 
  Spanish Mackerel 
  Reef Fish

<b>Mr/Mrs/Ms</b>	<b>Last Name or Name of Business</b>	<b>First Name</b>	<b>Middle Name</b>	<b>Suffix Name</b>			
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>			
<b>Mailing Address</b>		<b>Apt/Suite #</b>	<b>City</b>	<b>State</b>	<b>County</b>	<b>Zip Code</b>	<b>Country</b>
<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<b>Physical Address</b>		<b>Apt/Suite #</b>	<b>City</b>	<b>State</b>	<b>County</b>	<b>Zip Code</b>	<b>Country</b>
<input type="checkbox"/> Check box if same as Mailing Address		<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<b>SSN #</b>	<b>Date of Birth</b>	<b>Area Code</b>	<b>Phone Number</b>				
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>				

This entity is a (check all that apply):

- Historical Captain for Gulf of Mexico Charter/Headboat for Reef Fish  
 Historical Captain for Gulf of Mexico Charter/Headboat for Coastal Migratory Pelagic Fish  
 Red Snapper Class 1 License Qualifier  
 Income Qualifier for: (check all that apply) 
  Commercial King Mackerel 
  Commercial Spiny Lobster 
  Spanish Mackerel 
  Reef Fish

<b>Mr/Mrs/Ms</b>	<b>Last Name or Name of Business</b>	<b>First Name</b>	<b>Middle Name</b>	<b>Suffix Name</b>			
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>			
<b>Mailing Address</b>		<b>Apt/Suite #</b>	<b>City</b>	<b>State</b>	<b>County</b>	<b>Zip Code</b>	<b>Country</b>
<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<b>Physical Address</b>		<b>Apt/Suite #</b>	<b>City</b>	<b>State</b>	<b>County</b>	<b>Zip Code</b>	<b>Country</b>
<input type="checkbox"/> Check box if same as Mailing Address		<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<b>SSN #</b>	<b>Date of Birth</b>	<b>Area Code</b>	<b>Phone Number</b>				
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>				



**6. REEF FISH TRAPS AND SNAPPER-GROUPER POTS**

COMPLETE THIS SECTION ONLY IF YOU FISH WITH TRAPS OR POTS IN EITHER THE COMMERCIAL GULF OF MEXICO REEF FISH OR COMMERCIAL SOUTH ATLANTIC SNAPPER-GROUPER FISHERIES

Tag cost is \$1.30 per tag made payable by check or money order payable to Floy Tag, Inc.

If you have an existing buoy color code for ANY trap or pot fishery, list it here

Color Code

If you do not have an existing buoy color code for ANY trap or pot fishery, request your choice here (white is not an available color option).

Color Code

**Trap/Pot Information**

Gulf of Mexico (GOM)      Number of Traps   
 Size: L x W x H (in inches)   
 Mesh size (in inches)

South Atlantic (SA)      Number of Traps   
 Size: L x W x H (in inches)   
 Mesh size (in inches)



**Payment Reminder:**

**All applications must include payment of a non-refundable application fee in the form of a check or money order made payable to the US Treasury. The fee required is \$50.00 for the first fishery and \$25.00 for each additional fishery requested with this application.**

**7. SIGNATURE**

The undersigned certifies under penalty of perjury that the foregoing information is true and correct (28 U.S.C. section 1746; 18 U.S.C. section 1621; 18 U.S.C. section 1001). Further, the undersigned acknowledges that (1) if a shark permit is received, then shark fishing, catch and gear are subject to the shark regulations cited in 50 CFR 635.5, without regard to where such shark fishing occurs or where such shark and/or gear are possessed, taken or landed; and (2) if a spiny lobster tailing permit is requested, the applicant routinely fishes commercially in Federal waters on trips of up to 48 hours or more and that such fishing activity requires the separation of the tail and carapace to maintain quality product.

Please note: If the vessel listed in Section 1 is leased, the applicant who signs below must be an individual named as a lessee in Section 3, or an officer or shareholder of the lessee as listed in Section 4. If the vessel listed in Section 1 is not leased, the applicant must be an individual named as an owner in Section 3, or an officer or shareholder of the owner as listed in Section 4.

Applicant Signature       Position in Company       Date   
 Print Name       Operator Signature if required

Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the 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 suggestions for reducing this burden to Jason Rueter, National Marine Fisheries Service, F/SER22, 263 13th Avenue South, St. Petersburg, FL 33701.

The National Marine Fisheries Service requires this information for the conservation and management of marine fishery resources. The data reported will be used to develop, implement, and monitor fishery management activities for a variety of other uses. Responses to this collection are required to obtain or retain a fisheries permit under the Magnuson - Stevens Act. Name and address information will be released via a NOAA website. All other data submitted will be handled as confidential material in accordance with NOAA Administrative Order 216-100, Protection of Confidential Fishery Statistics. Notwithstanding any other provisions of the law, no person is required to respond to, nor shall any person be subjected 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.

**General Instructions:**

In addition to the instructions provided herein, applicants with specific questions are encouraged to contact the Permits Office at (727) 824-5326 between 8:00 a.m. and 4:30 p.m. ET, and to consult the U.S. Code of Federal Regulations whose guidance for application requirements, permit eligibilities, and related information will always prevail.

1. The application fee is **\$50 for one fishery and \$20 for each additional fishery** and is **non-refundable**. A check or money order payable to the **U.S. TREASURY** must accompany each application.
2. Mail the application, payment, and all required supporting documentation to: **NMFS (F/SER 1), 263 13th AVENUE SOUTH, ST. PETERSBURG, FL 33701**. If you would like your permit and associated documents returned to you via overnight mail, enclose a **FEDERAL EXPRESS** air bill, complete with your delivery address (no PO Box numbers), telephone number, and your **FEDEX** account number or major credit card number with expiration date.
3. If transferring a Gulf charter/headboat vessel permit, a copy of a **valid** U.S. Coast Guard Operator of Uninspected Passenger Vessel License (commonly referred to as a 6-pack license) or a valid U.S. Coast Guard Masters License must be provided, along with any other requested information. A **valid** U.S. Coast Guard Certificate of Inspection must be provided if passenger capacity is greater than 6 passengers. A valid temporary Certificate of Inspection will be accepted.
4. Each vessel issued a South Atlantic Rock Shrimp permit (regardless of whether or not issued the limited access endorsement) or an Atlantic Dolphin/Wahoo (charter or commercial) permit, when at sea or offloading, is required to have on board at least one person who has a Federal operator permit card issued by the NMFS Southeast Regional Office or the NMFS Northeast Regional Office.
5. Applicants who have submitted copies of their U.S. Coast Guard Documentation or State Registration, Certificate of Inspection, Vessel Lease Agreement, partnership agreement, annual business report, U.S. Coast Guard Operator of Uninspected Passenger Vessel License (commonly referred to as a 6-pack license) or a valid U.S. Coast Guard Masters License, or some other forms of documentation **may** not be required to submit such documentation with subsequent applications, provided that the documentation was submitted with an application (with a form revision date of later than February 2006) and is still valid (i.e., not expired) at the time this application package is received by the Permits Office. If you are unsure whether or not you already have documentation on file, which could be associated with this application, you may contact the Permits Office to verify the document status, or simply include another copy with this application.
6. If your application was partially or completely filled in and contains inaccurate or outdated information, please draw a line through the incorrect information and write the correct information above.
7. Requests to renew or transfer permits will not be processed until all required reporting requirements (e.g. logbooks, the MARFIN telephone survey, etc) have been met. Noncompliance with any reporting requirement will preclude processing of all permit transactions requests. To avoid delays, ensure you comply with all reporting requirements in a timely manner and in advance of any permit application requests. Send your logbook report(s) to **National Marine Fisheries Service, Research Management Division, Logbook Program, P.O. Box 491500, Key Biscayne, FL 33149-9916**. Questions concerning your reporting requirements should be phoned to the Research Management Division at 305/361-4581. We cannot renew or transfer your permit(s) until all reporting requirements (e.g. logbook submission) are met.
8. An Income Qualification Affidavit is now accepted as proof of meeting permit income qualification requirements. A signed Income Qualification Affidavit will be required with every application to renew or transfer an income qualified permit. A blank Income Qualification Affidavit should be included with this application, or you may download another from the internet at <http://sero.nmfs.noaa.gov/sf/permits.htm>
9. Applications to transfer permits for which the Federal regulations restrict transfers to certain family members or to a vessel with characteristics may be required to submit documentation to verify their eligibility for such transfers.

***In accordance with Federal regulations, any change in your permit information must be reported in writing to NMFS within 30 days of the change.***

**APPLICATION SECTION 1** Unless otherwise exempted by the application form, complete all portions of Section 1. Enter the Official Number and the length of the vessel as they appear on the U.S. Coast Guard Certificate of Documentation, or if not documented, the state registration certificate. If applying for a Highly Migratory Species commercial swordfish or shark permit issued without a vessel write "NO VESSEL" in the field for USCG Official Number.

**APPLICATION SECTION 2**

Indicate the fishery and transaction type for each permit requested in this application.

**APPLICATION SECTION 3**

Enter the information of the person shown as the "**owner/qualifier**" from the U.S. Coast Guard Certificate of Documentation or, if not documented, from the state registration certificate. Information on all owners and lessees is required. If additional space is needed, please photocopy the blank page as many times as is necessary to provide information on all vessel owners.

If owner/qualifier is an individual, provide the owner's date of birth and enter the Social Security Number (taxpayer ID information). If the person shown as the "**owner**" is a corporation or partnership, provide the date that the corporation was filed or the partnership was formed and the

company's Federal Tax ID number (taxpayer ID information). If the application is for a corporate-owned vessel, submit the Articles of Incorporation (and any amendments) along with the other requested information. If the Articles of Incorporation are already on file, submit a copy of the most current Annual Business Report. If corporations are in an INACTIVE status, permits will not be issued.

If the vessel is leased, also provide information on all vessel lessees. If lessee is an individual provide the owner's date of birth and enter the Social Security Number (taxpayer ID information). If the person shown as the "lessee" is a corporation or partnership, provide the date that the corporation was filed or the partnership was formed and the company's Federal Tax ID number (taxpayer ID information). If the application is for a corporate leased vessel, submit the Articles of Incorporation (and any amendments) along with the other requested information. If the Articles of Incorporation are already on file, submit a copy of the most current Annual Business Report. If corporations are in an INACTIVE status, permits will not be issued.

If the vessel is leased, provide a copy of the signed (both parties) and dated lease agreement (see page 2 of these instructions for lease details).

If any entities named as a vessel owner or for leased vessels named as vessel lessee are also an income qualifier for permits associated with this application, indicate the permits for which their income has been used for income qualification and submit a signed Income Qualification Affidavit.

#### **APPLICATION SECTION 4**

If the application is for a vessel that is owned by corporation, partnership, or other business entity then information on the owner's officers/shareholders is required. Information on all officers/shareholders associated with the vessel owners and/or lessees is required. If additional space is needed, please photocopy the blank page as many times as is necessary to provide information on all officers/shareholders associated with the vessel owners and lessees.

If any individuals named as an officer or shareholder of the vessel owner, or for leased vessels named as an officer or shareholder of the vessel lessee, are also an income qualifier for permits associated with this application, indicate the permits for which their income has been used for income qualification, and submit a signed Income Qualification Affidavit.

#### **APPLICATION SECTION 5**

Complete this section only for applications that include:

- Gulf of Mexico Charter/Headboat permits with a Historical Captain provision,
- Red Snapper Class 1 License Qualifier that has been leased from someone else, or
- King Mackerel, Spanish Mackerel, Reef Fish, and/or Commercial Spiny Lobster permit which has been income qualified using the fishing income of an operator who is neither a vessel owner or lessee as listed in Section 3 of this application, nor is the operator an officer of a business that owns or leases the vessel, as listed in Section 4 of this application.

For all other applications, this section should remain blank.

**APPLICATION SECTION 6** Complete this section only if you fish with traps/pots in the reef fish fishery of the Gulf of Mexico or the snapper-grouper fishery off the southern Atlantic states. **A separate check or money order for trap/pot tags (\$1.30 per tag) payable to FLOY TAG INC. is required for use in the reef fish and snapper-grouper fisheries.** Tags will be mailed directly from Floy Tag Inc., and will not be sent with the permit package. New Floy Tags will not be available for fish traps in the Gulf of Mexico beginning in mid to late 2006. Fish Traps in the Gulf of Mexico will not be a legal method of catch beginning on February 8, 2007.

**APPLICATION SECTION 7** The application must be signed by the vessel owner or for leased vessels by the vessel lessee. For corporate owned or leased vessels, an officer or shareholder of the vessel owner or vessel lessee must sign and date the application.

## **RENEWAL AND INITIAL (NEW) ISSUANCE OF PERMITS**

- All permit renewal and first issuance requests must include, as a minimum: an application, the appropriate fees, and a front and back copy of the unexpired U.S. Coast Guard Certificate of Documentation or state registration certificate. If this documentation is on file with the Permits Office, then it does not need to be provided again with this application. If you are unsure whether or not you already have documentation on file, which could be associated with this application, you may contact the Permits Office to verify the document status, or simply include another copy with this application.
- Applications for permits that will be owned by a business must submit a copy of the active Articles of Incorporation (Articles of Organization for an LLC). A letter of Good Standing or Certificate of Incorporation is insufficient for our requirements. A current copy of your annual report (Uniform or Annual Business Report or State Franchise Tax public information section) must be included. The required report is the report you file (generally annually) with your State to maintain a record of your business address and active corporate officers. It may be filed as a part of your State business tax return or filed separately with the Secretary of State. Please do not send your annual financial report. Each state has a different name or requirement for this report. Please contact your state for details about your reporting requirements. If this documentation is on file with the Permits Office then it does not need to be provided again with this application. If you are unsure whether or not you already have documentation on file, which could be associated with this application, you may contact the Permits Office to verify the document status, or simply include another copy with this application.
- If the vessel is leased/rented/leased to own, include a copy of the current lease agreement. Both the vessel owner(s) and the lessee(s) must sign and date the lease agreement. The lease must state the beginning and ending dates of the lease term. If this documentation is on file with the Permits Office then it does not need to be provided again with this application. If you are unsure whether or not you already have documentation on file, which could be associated with this application, you may contact the Permits Office to verify the document status, or simply include another copy with this application.

- To ensure that your renewal goes as quickly and smoothly as possible, send your logbook report(s) to **National Marine Fisheries Service, Research Management Division, Logbook Program, P.O. Box 491500, Key Biscayne, FL 33149-9916**. Questions concerning your reporting requirements should be phoned to the Research Management Division at 305/361-4581. We cannot renew your permit(s) until all logbook reporting requirements are met.

## TRANSFERS

- All permit transfer requests must include, as a minimum: an application, the original permits with appropriate signatures on the back, the appropriate fees, and a front and back copy of the unexpired U.S. Coast Guard Certificate of Documentation or state registration certificate. If this documentation is on file with the Permits Office then it does not need to be provided again with this application. If you are unsure whether or not you already have documentation on file which could be associated with this application, you may contact the Permits Office to verify the document status, or simply include another copy with this application.
- Applications for permits that will be owned by a business must submit a copy of the active Articles of Incorporation (Articles of Organization for an LLC). A letter of Good Standing or Certificate of Incorporation is insufficient for our requirements. A current copy of your annual report (Uniform or Annual Business Report or State Franchise Tax public information section) must be included. The required report is the report you file (generally annually) with your State to maintain a record of your business address and active corporate officers. It may be filed as a part of your State business tax return or filed separately with the Secretary of State. Please do not send your annual financial report. Each state has a different name or requirement for this report. Please contact your state for details about your reporting requirements. If this documentation is on file with the Permits Office then it does not need to be provided again with this application. If you are unsure whether or not you already have documentation on file which could be associated with this application you may contact the Permits Office to verify the document status, or simply include another copy with this application.
- **SIGNATURES ON PERMITS:** provide the **valid** (not expired) **ORIGINAL** transferable permit(s) with the signatures of both the buyer and seller on the reverse of the permit.
  - If the buyer and/or seller are a joint ownership, ALL persons that sell and /or buy the permit **MUST** sign the permit.
  - If transferring to a different vessel owned by the same entity (person or business), no signatures are required unless the permit(s) is a Gulf of Mexico Charter Permit(s).
  - Signatures are required to transfer Gulf of Mexico Charter Permit(s) to certify that you have removed the charter permit sticker from the old vessel.
  - Permits sold or bought by a business must be signed by an officer or shareholder of the business. The correct format must include the signature, the person's position in the business and the company name, for example:  
*John Doe*, President, ABC Fishing Inc.
- Applications for the transfer of Gulf of Mexico Charter/Headboat permits must provide a copy of the unexpired USCG Operator of Uninspected Passenger Vessel License or Masters License. If larger than a 6-pack, you must also provide a copy of the vessel's unexpired Certificate of Inspection (COI).
- Gulf of Mexico charter/headboat permits (including Historical Captain permits) may not be transferred to a vessel that has a larger U.S. Coast Guard passenger capacity rating than the permit's baseline passenger rating. For example, a 10 passenger permit may not be transferred to a vessel with a COI for 12 passengers. Permits with a 6 passenger rating (6 pack) may only be transferred to an uninspected vessel (another "6 pack" vessel).
- Upon transfer of a Gulf of Mexico moratorium Coastal Migratory Pelagic charter/headboat permit and/or Gulf of Mexico moratorium Reef Fish charter/headboat permit, the Federal charter/headboat **decals must be removed** from your vessel.
- New owners of Limited Access/Moratorium permits must meet the earned income requirement not later than the first full calendar year after the issuance of the permit.
- Transfer of Atlantic SHARK or SWORDFISH permits for swordfish handgear or swordfish and shark directed permits are subject to size increase limitations. The vessel the permit(s) are assigned to cannot exceed a 10% increase in baseline length, gross or net tonnage and 20% increase in baseline horsepower from the vessel the permit was first issued to. Swordfish handgear permits are transferable, but only for use with handgear.
- If the vessel is leased/rented/leased to own, include a copy of the current lease agreement. Both the vessel owner(s) and the lessee(s) must sign and date the lease agreement. The lease must state the beginning and ending dates of the lease term. **Expired permits may not be transferred.**
- The following permits are NOT transferable:
 

<u>Commercial Permits</u> Spanish Mackerel Atlantic Dolphin/Wahoo - Commercial Spiny Lobster Spiny Lobster Tailing South Atlantic Rock Shrimp	<u>Charter/Headboat Permits</u> South Atlantic Charter for Coastal Migratory Pelagic Fish South Atlantic Charter for Snapper-Grouper Atlantic Dolphin/Wahoo - Charter
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## DUPLICATE OR REPLACEMENT PERMITS

To request replacement of lost permits the USCG Official Number and/or the State Registration Number fields of Section 1 must be completed. Section 2 must be completed to indicate for which permit(s) duplicates are requested. The application must be signed in Section 7 by a permit owner. A check or money order for \$18 payable to the U.S. Treasury must accompany the application.

### FEES

Fees for permit renewal, Initial issuance and transfers are \$50 for the first permit, \$20 for each additional permit.

1 = \$50	2 = \$70	3 = \$90	4 = \$110	5 = \$130	6 = \$150	7 = \$170
8 = \$190	9 = \$210	10 = \$230	11 = \$250	12 = \$270	13 = \$290	14 = \$310
15 = \$330	16 = \$350	17 = \$370	18 = \$390	19 = \$410	20 = \$430	21 = \$450

A flat rate fee of \$18 is assessed for replacement of one or more permits issued to a single vessel.

### EARNED INCOME OR GROSS SALES REQUIREMENTS FOR COMMERCIAL PERMITS

	KING & SPANISH MACKEREL	REEF FISH (GULF OF MEXICO)	SPINY LOBSTER
<b>Percentage of earned income</b>	<b>At least 25%</b>	<b>More than 50%</b>	<b>At least 10%</b>
<b>Gross sales alternative</b>	<b>More than \$10,000 in sales of fish</b>	<b>N/A</b>	<b>N/A</b>
<b>Source of earned income</b>	<b>Commercial, charter, or headboat</b>	<b>Commercial, charter, or headboat</b>	<b>Sale of catch</b>
<b>Time frame for qualification</b>	<b>One of three years prior to application</b>	<b>Either of two years prior to application</b>	<b>Year prior to application</b>

The following fisheries do not require any earned income:

COMMERCIAL

- Atlantic Dolphin/Wahoo - Commercial
- Shark
- Swordfish
- South Atlantic Rock Shrimp
- South Atlantic Rock Shrimp Limited Entry Area Endorsement
- Spiny Lobster Tailing
- South Atlantic Unlimited Snapper-Grouper excluding Wreckfish
- South Atlantic 225 lb. Trip Limit Snapper-Grouper excluding Wreckfish
- Red Snapper Class 1 or Class 2
- Gulf of Mexico Shrimp

CHARTER/HEADBOAT

- Atlantic Dolphin/Wahoo - Charter
- Gulf of Mexico Coastal Migratory Pelagic Fish Charter/Headboat
- South Atlantic Coastal Migratory Pelagic Fish Charter/Headboat
- South Atlantic Charter for Snapper-Grouper
- Gulf of Mexico Reef Fish Charter/Headboat

An Income Qualification Affidavit is now accepted as proof of meeting permit income qualification requirements. A signed Income Qualification Affidavit will be required with every application to renew or transfer an income qualified permit.

**KNOWINGLY SUPPLYING FALSE INFORMATION OR WILLFULLY OVERVALUING ANY FISHING INCOME FOR THE PURPOSE OF OBTAINING A PERMIT IS A VIOLATION OF FEDERAL LAW PUNISHABLE BY A FINE AND/OR IMPRISONMENT.**

Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the 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 suggestions for reducing this burden to Jason Rueter, National Marine Fisheries Service, F/SER22, 263 13<sup>th</sup> Avenue South, St. Petersburg, FL 33701.

The National Marine Fisheries Service requires this information for the conservation and management of marine fishery resources. The data reported will be used to develop, implement, and monitor fishery management activities for a variety of other uses. Responses to this collection are required to obtain or retain a fisheries permit under the Magnuson - Stevens Act. Non-confidential information may be released via a NOAA Fisheries website. Non confidential information means: Name, Street Address, City, State, Zip code, Effective Date of Permit, Permit Types, Vessel Name, Vessel Identification Number, and Passenger Capacity in the case of a "for hire" vessel for individual, corporate and lease holders of permits. All other data submitted will be handled as confidential material in accordance with NOAA Administrative Order 216-100, Protection of Confidential Fishery Statistics. Notwithstanding any other provisions of the law, no person is required to respond to, nor shall any person be subjected 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.

## ACTIVITIES FOR WHICH PERMITS ARE REQUIRED

**ATLANTIC DOLPHIN-WAHOO CHARTER VESSEL/HEADBOAT-** For a person aboard a vessel that is operating as a charter vessel/headboat to fish for or possess a dolphin-wahoo in or from Federal waters in the Atlantic, an Atlantic dolphin-wahoo charter vessel/headboat permit must be issued to that vessel. There are no earned income or landing requirements for this permit. An owner of a charter vessel/headboat who desires to sell dolphin is required to obtain a dolphin-wahoo commercial vessel permit (see below) in addition to the charter vessel/headboat permit. (The sale of wahoo harvested in the Atlantic EEZ by a vessel operating as a charter vessel/headboat is not allowed.) This permit is for the vessel it is assigned to. The permit will only be valid if there is someone on the vessel that has a valid Vessel Operator Permit Card issued by the Southeast Regional Office of NMFS or by the Northeast Regional Office of NMFS.

**ATLANTIC DOLPHIN-WAHOO COMMERCIAL VESSEL-** A vessel must be issued an Atlantic dolphin-wahoo commercial permit to be eligible for exemption from the bag and possession limits for dolphin-wahoo in the Atlantic EEZ or to sell dolphin-wahoo harvested in the Atlantic EEZ. This permit is for the vessel it is assigned to. The permit will only be valid if there is someone on the vessel that has a valid Vessel Operator Permit Card issued by the Southeast Regional Office of NMFS or by the Northeast Regional Office of NMFS.

**GULF COASTAL MIGRATORY PELAGIC CHARTER** - For a person aboard a vessel that is operating as a charter vessel or headboat to fish for or possess a coastal migratory pelagic fish in or from Federal waters in the Gulf of Mexico, a moratorium charter permit must be issued to the vessel and be on board. Permits for Gulf coastal migratory pelagic charter are under a moratorium. No new vessel may be permitted except by transfer of a valid (not expired) permit. To transfer a Gulf of Mexico Charter/Headboat for Coastal Migratory Pelagic fish permit, the original valid (not expired) permit must be returned with an application and applicable documents. **Permits must be renewed within one year of the expiration date.**

**GULF REEF FISH CHARTER** - For a person aboard a vessel that is operating as a charter vessel or headboat to fish for or possess a reef fish in or from Federal waters of the Gulf of Mexico, a moratorium charter permit must be issued to the vessel and be on board. Permits for Gulf of Mexico reef fish charter are under a moratorium. No new vessel may be permitted except by transfer of a valid (not expired) permit. To transfer a Gulf of Mexico Charter/ Headboat for Reef Fish permit, the original valid (not expired) permit must be returned with an application and applicable documents. **Permits must be renewed within one year of the expiration date.**

**SOUTH ATLANTIC COASTAL MIGRATORY PELAGIC CHARTER OR SNAPPER-GROUPER CHARTER** - For a person aboard a vessel that is operating as a charter vessel or headboat to fish for or possess a coastal migratory pelagic or snapper-grouper in or from Federal waters off the southern Atlantic states, a charter permit must be issued to the vessel and be on board.

**SPANISH MACKEREL** - For a person aboard a vessel in Federal waters to be eligible for exemption from the bag limits and to fish under a commercial allocation for Spanish mackerel, a commercial permit must be issued to the vessel and be on board. At time of application income criteria must be submitted. *If applying for a Spanish mackerel permit, earned income or gross sales from one of three years prior to application must be submitted at time of application. See Earned Income or Gross Sales Requirements for Commercial Permits on page 4.*

**SPINY LOBSTER** - For a person aboard a vessel in Federal waters off of Texas, Louisiana, Mississippi, or Alabama to be exempt from the daily catch and possession limit, a commercial spiny lobster permit must be issued to the vessel and be on board. Florida's requirements apply to a vessel fishing in Federal waters off Florida. The daily bag or possession limit for spiny lobster in or from the EEZ of the southern Atlantic states other than Florida (North Carolina, South Carolina, and Georgia), is two per person for recreational and commercial fishing, year round. To possess a separated spiny lobster tail in or from Federal waters, a tail-separation permit must be issued to the vessel and be on board. Tail separation permits may only be obtained for vessels that, due to the nature of the fishing, are required to remain at sea for 48 hours or longer. *If applying for a commercial spiny lobster permit, income from the previous calendar year must be submitted at time of application.*

**KING MACKEREL** - For a person aboard a vessel in Federal waters to be eligible for exemption from the bag limits and to fish under a commercial allocation for king mackerel, a commercial permit must be issued to the vessel and be on board. Permits for king mackerel are under a limited entry program. No new vessel may be permitted except by transfer of a valid (not expired) permit. To transfer a King Mackerel permit, the original valid (not expired) permit must be signed as appropriate, and returned with the application and all applicable documents. **Permits must be renewed within one year of the expiration date.**

**GILLNET FOR KING MACKEREL** - For a person aboard a vessel in Federal waters to use a run-around gillnet for king mackerel in the southern Florida west coast subzone, a commercial gillnet permit for king mackerel must be issued to the vessel and be on board. Gillnet permits for king mackerel are under a limited entry program. No new vessel may be permitted except by transfer of a valid (not expired) permit. Gillnet permits for King Mackerel may only be transferred to an immediate family member (mother, father, husband, wife, son, daughter, brother, sister). To transfer a gillnet for King Mackerel permit, the original valid (not expired) permit must be signed as appropriate, and returned with the application and all applicable documents. **Permits must be renewed within one year of the expiration date.**

**GULF OF MEXICO REEF FISH** - As a prerequisite to sell reef fish in or from Federal waters and to be eligible for exemption from the bag limits, a commercial permit must be issued to the vessel and be on board. Permits for the commercial reef fish fishery are under a limited entry program. No new vessels may be permitted except by transfer of a valid (not expired) permit. To transfer a Gulf of Mexico Reef fish permit, the original valid (not expired) permit must signed as appropriate, and returned with the application and all applicable documents. **Permits must be renewed within one year of the expiration date.**

**SOUTH ATLANTIC LIMITED ACCESS ROCK SHRIMP ENDORSEMENT** - For a person aboard a fishing vessel to fish for rock shrimp in Federal waters from the Virginia/North Carolina border to the East Coast of Florida, or possess rock shrimp in or from Federal waters, a vessel permit for rock shrimp must be issued to the vessel and be on board. However, to participate in that fishery off Georgia and the east coast of Florida, a limited-access endorsement for South Atlantic rock shrimp is required. To transfer a limited access endorsement for South Atlantic rock shrimp, the original valid (not expired) endorsement must signed as appropriate, and returned with the application and all applicable documents. **Permits must be renewed within one year of the expiration date.**

**SOUTH ATLANTIC SNAPPER-GROUPER EXCLUDING WRECKFISH PERMITS** - For a person aboard a vessel in Federal waters to be eligible for exemption from the bag limits, to engage in a directed fishery for tilefish or to use a sea bass pot, a commercial permit must be issued to the vessel and be on board. Permits for the South Atlantic snapper-grouper fishery are under a limited entry program. No new vessels may be permitted except by transfer of a valid (not expired) permit. A person desiring to acquire a permit for South Atlantic unlimited snapper-grouper (excluding wreckfish) must obtain and exchange two such permits for one new permit. South Atlantic snapper-grouper (excluding wreckfish) 225 trip limit permits are only transferable to a vessel owned or leased by the same permit owner; ownership of the permit may not be transferred. The original valid (not expired) permits must be returned with the application and applicable documents. **Permits must be renewed within 60 days of the expiration date.**

**SHARK** - As a prerequisite to sell a shark in or from Federal waters and to be eligible for exemption from the bag limits, a commercial permit must be issued to the vessel and be on board. Permits for the shark fishery are under a limited entry program. No new vessels may be permitted except by transfer of a valid (not expired) limited entry permit. To transfer a shark permit, the original valid (not expired) permit must be signed as appropriate, and returned with the application and all applicable documents. **Permits must be renewed within one year of the expiration date.**

**SWORDFISH** - To fish for or possess swordfish in or from the North Atlantic Ocean, or take swordfish as bycatch, whether or not retained, a commercial permit must be issued to the vessel and be on board. Permits for the swordfish fishery are under a limited entry program. No new vessels may be permitted except by transfer of a valid (not expired) limited entry permit. To transfer a swordfish permit, the original valid (not expired) permit must be signed as appropriate, and returned with the application and all applicable documents. **Permits must be renewed within one year of the expiration date.**

**SOUTH ATLANTIC SHRIMP** - For a person aboard a trawler to fish for penaeid shrimp (brown, pink, or white shrimp) in the South Atlantic EEZ or possess penaeid shrimp in or from the South Atlantic EEZ, a valid (not expired) commercial vessel permit for South Atlantic penaeid shrimp must have been issued to the vessel and must be on board.

**GULF SHRIMP** - For a person aboard a vessel to fish for shrimp in the Gulf EEZ or possess shrimp in or from the Gulf EEZ, a valid (not expired) commercial vessel permit for Gulf shrimp must have been issued to the vessel and must be on board.