



U.S. DEPARTMENT OF COMMERCE  
 NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION  
 NATIONAL MARINE FISHERIES SERVICE  
 501 WEST OCEAN BLVD  
 SUITE 4200  
 LONG BEACH, CA 90802

OMB#: 0648-0204  
 APPROVAL EXPIRES: 04/30/2010

## Pacific Highly Migratory Species Vessel Permit Application

<b>SECTION 1 VESSEL INFORMATION (please print legibly or type)</b>				
USCG DOC. OR STATE REG. NO. VESSEL		VESSEL NAME		HULL IDENTIFICATION NUMBER
HOME PORT AND STATE			USCG DOCUMENTED HAIL PORT AND STATE	
RADIO CALL SIGN		DOES THIS VESSEL HAVE AN OPERATIONAL VMS? YES _____ NO _____		
REGISTERED LENGTH (FT.)	REGISTERED BREADTH (FT.)	REGISTERED DEPTH (FT.)	GROSS TONS	NET TONS
HOLD CAPACITY (SHORT TONS)		HOLD CAPACITY (METRIC TONS)		HOLD CAPACITY (CUBIC METERS)
PROPULSION TYPE	REFRIGERATION TYPE	HORSEPOWER		HULL MATERIAL
YEAR BUILT	LOCATION BUILT	CREW SIZE (INCLUDING OFFICERS)	PASSENGER CAPACITY	
PREVIOUS VESSEL NAMES		VESSEL FLAG	EFFECTIVE DATES	

<b>SECTION 2 SELECT THE TYPE OF GEAR TO BE AUTHORIZED BY THE HMS PERMIT</b>				
COMMERCIAL:			RECREATIONAL:	
<input type="checkbox"/> HARPOON	<input type="checkbox"/> PURSE SEINE	<input type="checkbox"/> CHARTER VESSEL		
<input type="checkbox"/> TROLL/JIG	<input type="checkbox"/> LONGLINE			
<input type="checkbox"/> DRIFT GILLNET	<input type="checkbox"/> BAITBOAT			

<b>SECTION 3 VESSEL OWNERSHIP INFORMATION</b>				
COMPANY NAME		DATE CORPORATION FILED	EIN/SSN	DUNNS NO.
BUSINESS ADDRESS		CITY		STATE
BUSINESS TELEPHONE	BUSINESS FAX	BUSINESS CELL PHONE		BUSINESS E-MAIL
MANAGING OWNER NAME LAST	FIRST	MIDDLE	SUFFIX	DATE OF BIRTH (MONTH/DAY/YEAR)
SECOND OWNER NAME LAST	FIRST	MIDDLE	SUFFIX	DATE OF BIRTH (MONTH/DAY/YEAR)
THIRD OWNER NAME LAST	FIRST	MIDDLE	SUFFIX	DATE OF BIRTH (MONTH/DAY/YEAR)

<b>SECTION 4 SIGNATURE (All applications must be signed and dated)</b>		
I certify that the above information is complete, true, and correct to the best of my knowledge and belief.		
OWNER'S SIGNATURE:	NAME: (Print legibly or type)	DATE:

**General** - This information is being collected by the National Marine Fisheries Service to ensure that timely and accurate records are available concerning the fishing vessels of the U.S. that participate in Pacific Ocean fisheries for highly migratory species, consistent with the requirements of the Fishery Management Plan for U.S. West Coast Fisheries for Highly Migratory Species. The collection of information concerning U.S. fishing vessels harvesting tuna in the eastern Pacific Ocean is also necessary for the U.S. to comply with its obligations as a member of the Inter-American Tropical Tuna Commission.

This permit is required for commercial fishing vessels and recreational charter vessels that harvest any of the species that are included in the FMP. They are: Billfish/Swordfish: striped marlin (*Tetrapturus audax*); swordfish (*Xiphias gladius*). Sharks: common thresher shark (*Alopias vulpinus*); pelagic thresher shark (*Alopias pelagicus*); bigeye thresher shark (*Alopias superciliosus*); shortfin mako or bonito shark (*Isurus oxyrinchus*); blue shark (*Prionace glauca*). Tunas: north Pacific albacore (*Thunnus alalunga*); yellowfin tuna (*Thunnus albacares*); bigeye tuna (*Thunnus obesus*); skipjack tuna (*Katsuwonus pelamis*); northern bluefin tuna (*Thunnus orientalis*). Other: dorado or dolphinfish (*Coryphaena hippurus*)

## **Instructions -**

Section 1 - Enter vessel information as it appears on the Coast Guard documentation or, if the vessel is not Coast Guard documented, as it appears on the state registration certificate.

Hull Identification Number - If your vessel does not have a hull identification number leave the box blank.

Home Port - enter the city and state where the vessel is customarily kept, not necessarily the home port listed on the certificate of documentation.

Hail Port - enter the city and state listed on the certificate of documentation

Radio Call Sign - If your vessel has no radio, leave blank

Operational VMS - Global positioning system using satellites to track vessel movements

Hold Capacity - Cubic Meters is preferred; however, Short Tons or Metric Tons are acceptable

Provide all other information required to the best of your ability.

Section 2 - For commercial fishing vessels, mark only gears that the vessel will use to harvest highly migratory species. Indicate only whether a recreational vessel is a charter or commercial passenger fishing vessel (CPFV). It is not necessary to list any gear for recreational vessels.

Section 3 - Enter an Employer Identification Number (EIN) if you have one, and the vessel owners' Social Security Number(s). The owner's date of birth will be used as an additional identifier and to establish the two-year renewal date for the permit. Enter the month, day, and year. Contact information for all owners of the vessel is required. If there are more than three owners, use an additional sheet. It is recommended that vessel owners obtain a DUNNS Number by contacting Dunn and Bradstreet at their website: [www.dnb.com](http://www.dnb.com).

**Privacy Act Statement:** Federal Regulations (at 50 CFR Part 660) authorize collection of this information. This information is used to verify the identity of the applicant(s) and to accurately retrieve confidential records related to federal commercial fishery permits. Where the requested information is a Social Security Number, disclosure is mandatory in accordance with the Debt Collection Act (31 U.S.C. 7701).

**Your Social Security Number (SSN)** is confidential and is protected under the Privacy Act. Disclosure of your SSN is mandatory. The primary purpose for requiring the SSN and EIN is to verify the identity of individuals/entities doing business with the government as required by the Debt Collection Improvement Act of 1996 (Public Law 104-134).

**Paperwork Reduction Act** - Public reporting burden for this collection of information is estimated to average 40 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining data, and completing and reviewing the collection of information. Notwithstanding any other provision of the law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Regional Administrator, National Marine Fisheries Service, 501 West Ocean Blvd., Long Beach, CA 90802-4213.