

# NOTICE OF INTENT TO HARVEST AQUACULTURED LIVEROCK

Name: \_\_\_\_\_

Business Name: \_\_\_\_\_  
(Owner/Operator)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Notification: \_\_\_\_\_ Time: \_\_\_\_\_

NOAA/NMFS Receiving Notification: Yes \_\_\_\_\_ FWCC Receiving Notification: Yes \_\_\_\_\_  
Notification by fax \_\_\_\_\_ or phone \_\_\_\_\_ Notification by fax \_\_\_\_\_ or phone \_\_\_\_\_

Permit Number of Site to be Harvested: \_\_\_\_\_ Date of Harvest: \_\_\_\_\_

Name of Vessel used in Harvest: \_\_\_\_\_  
Official Number of Harvesting Vessel: \_\_\_\_\_

Date of When Aquacultured Liverock is to be Landed: \_\_\_\_\_  
Port to be Landed: \_\_\_\_\_  
Facility where Landed: \_\_\_\_\_

COMMENTS:

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