



Special Coral Reef Ecosystem Fishing Permit Application Form

Applicant Information (Please print legibly) Date: ____ / ____ / ____
 Full Name or Business Name: _____
 Taxpayer Identification Number (EIN or SSN): _____
 Date of Birth/Incorporation: _____; State of Incorporation: _____
 Business Mailing Address: _____
Street Apt.# City State ZIP
 Business Phone: _____ Cell: _____ Fax: _____
 Email: _____

Vessel Operator? Yes ___ ; No ___ (If Yes, complete the vessel information)
 Vessel Name: _____ Home Port: _____
 Length (ft): _____ Net Tonnage: _____ Gross Tonnage: _____
 Vessel: (check one) USCG Documentation ___ ; State License ___ ;
 Vessel Registration Number: _____ ; Radio Call Sign: _____

Privacy Act Statement: Federal Regulations (at 50 CFR Part 665) 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. The primary purpose for requesting the TIN is for the collection and reporting on any delinquent amounts arising of such person's relationship with the government pursuant to the Debt Collection Improvement Act of 1996 (Public Law 104-134). Personal information is confidential and protected under the Privacy Act (5 U.S.C. 552a). Business information may be disclosed to the public.

Is this permit solely to transship coral reef ecosystem taxa received from another vessel around the EEZ of the
 Northwestern Hawaiian Islands, the Pacific Remote Island Areas, or any other MPA? _____
 Do you agree to accommodate an observer on board while fishing, if required? _____
 Does vessel have an individual Vessel Monitoring System? _____
 Do you agree to submit daily log data within 30 days of returning to port? _____ or transshipment log data within 7 days
 of returning to port? _____

Describe your intended target and incidental species, expected catch, processing, and reason for harvesting:

Target Species or Taxa				Expected Incidental Species or Taxa		
Species Name	Expected Catch (lb) (#, wt.)	How will it be processed? ¹	Why harvested? ²	Species Name	Expected Catch (lb) (#, wt.)	Keep?

¹Live, fresh, frozen, preserved, other
²Food, ornamental, research, other

In which EEZ Management Subarea will fishing be conducted? (check only one)

Main Hawaiian Islands _____ American Samoa _____ Guam _____ Guam's Southern Banks _____
CNMI _____ PRIA (specify) _____

Fishing Gears To Be Used:

1) _____ ; 2) _____ ; 3) _____

Check any special exemption for which you qualify and would like to be eligible for under this permit application

(attach description of conditions under which you apply):

Other FMP _____ Scientific Bioprospecting _____ General Indigenous _____
Indigenous use of live rock/coral _____ Aquaculture seed stock of coral _____

Required Documents:

- 1) Attach statement describing objectives and details of proposed fishing operation, estimated ecosystem, habitat and protected species impacts, and any additional information to help support approval of this application.
- 2) Attach copy of current USCG vessel documentation or state/territory vessel registration.

It is prohibited to file false information on any application for a fishing permit (50 CFR § 665.15(b)).

Applicant Name (print): _____

Applicant Signature: _____ **Date:** _____

Paperwork Reduction Act Information

Public reporting burden for this collection is estimated to average 120 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 Regional Administrator, NMFS Pacific Islands Region, 1601 Kapiolani Blvd., Suite 1110, Honolulu, Hawaii, 96814-4700.

This information is being collected to provide the information needed by NMFS to regulate and monitor the coral reef fisheries and resources managed under the Fishery Management Plan for Coral Reef Ecosystems of the Western Pacific Region (FMP) and to evaluate the effectiveness of management by assessing the status of stocks and the status of the fisheries. The information provides a basis for determining whether changes in management are needed to sustain the productivity of the stocks or to respond to interactions between fishing vessels and protected species and to address economic problems in the fishery. The information is also used to provide a basis for evaluating the magnitude and distribution of impacts resulting from changes to the regulations. Responses to the collection are required under 50 CFR 665.13. Proprietary data provided concerning the vessel and/or business of the respondents are handled as confidential under the Magnuson-Stevens Fishery Conservation and Management Act (Sec.402(b)). Notwithstanding any other 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.