

FISHING YEAR 2014 SEA SCALLOP ACCESS AREA

TRIP EXCHANGE APPLICATION

SUBMIT TO:

APSD - Sea Scallop Trip Exchange NOAA Fisheries 55 Great Republic Drive, Gloucester, MA 01930 Fax: (978) 281-9110 EMail: scallopifg.transfer@noaa.gov

Instructions: This form must be used to request a Sea Scallop Access Area trip exchange between two vessels. Trips may be exchanged on a one-for-one basis and may only occur between vessels within the same permit category (Full-time, Part-time, or Occasional). One form must be used for each exchange. This form may be duplicated for additional exchange requests. Vessel operators may not initiate the Access Area trip requested below until vessel owners receive written notice that the request has been approved. Written approval or disapproval of the request will be provided within 15 days of receipt of this form.

Vessel A: Owner Name _			Permit #	
Vessel Nar	ne		Official #	
The owner of Vessel A	wishes to give on	e trip to Vesse	el B in the following access area (Circle One):	
	CAII	<u>DMV</u>	NLAA	
Vessel B: Owner Name			Permit #	
Vessel Name			Official #	
In exchange, the owner of	f <u>Vessel B</u> wishes	s to give one tri	ip to Vessel A in the following access area (Circle One)):
	<u>CAII</u>	<u>DMV</u>	<u>NLAA</u>	
scallop permit holders on Jun 25 to the Sea Scallop Fishery	e13, 2014 as the y Management Pl	re are some pro an that may af	ead the permit holder letter that was sent to all limited according to a series ogram requirements that have been implemented in Fraffect your ability to use the Delmarva Access Area. If your Sustainable Fisheries Division at: (978) 281-9315.	amework /ou have
Owner of Vessel A: (Signature)			Date:	
Owner of Vessel B: (Signature)			Date:	
Access area codes: Closed	Area II = CAII; D	elmarva Acces	ss Area = DMV; Nantucket Lightship Access Area = NL	-AA

Signature of this form certifies that the information provided on this form is true, complete and correct to the best of the vessel owner's knowledge, and made in good faith (18 U.S.C. 1001). Making a false statement on this form is punishable by law.

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. Public reporting burden for this collection of information is estimated to average 5 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining data needed, and completing and reviewing the information. Send comments regarding this burden estimate or suggestions for reducing this burden to NMFS, 55 Great Republic Drive, Gloucester, MA 01930; and to OMB, Paperwork Reduction Project, Washington, DC 20509. OMB Approval No. 0648-0491; Expires 7/30/2017.