

U.S. DEPT OF COMMERCE, NOAA
 NMFS PERMITS OFFICE, F/SER14
 263 13th Avenue South
 St. Petersburg, FL 33701
 Toll Free 877/376-4877 (8:00 am - 4:30 pm ET)
 727/824-5326 (8:00 am - 4:30 pm ET)
 http://sero.nmfs.noaa.gov



FEDERAL PERMIT APPLICATION FOR VESSELS FISHING FOR WRECKFISH OFF THE SOUTH ATLANTIC STATES

Application ID

FOR OFFICE USE ONLY

FOR OFFICE USE ONLY

Reviewer's Initials and Date	
Permit Check or Money Order Number and Amount	
Sanction Case Number if Sanctioned	
Non Compliance Hold Date	
Non Compliance Cleared Date	
PERMIT NUMBER	
Expiration Date	

REMEMBER TO SEND A COPY of your current (not expired) United States Coast Guard (USCG) Certificate of Documentation. If this vessel is not documented, send a copy of your state vessel registration. If we have a copy of your documentation or state registration on file, it must not be expired. Do not send your original. We cannot accept a bill of sale. If your vessel's state registration does not list all owners of the vessel, also provide a copy of the vessel's title, or other documentation from the appropriate state agency that identifies all vessel owners.

- Please provide the following required information.
- The application fee is \$50.00, payable as Check or Money Order made out to the U.S. Treasury.

April 16, 2012- January 14, 2013

1. VESSEL INFORMATION

<p>OFFICIAL NUMBER FROM USCG CERTIFICATE OF DOCUMENTATION (if the vessel is documented)</p> <div style="border: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <p>STATE REGISTRATION NUMBER (as applicable)</p> <div style="border: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <p>VESSEL NAME</p> <div style="border: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <p>HULL IDENTIFICATION or IMO NUMBER</p> <div style="border: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <p>HAILING PORT CITY</p> <div style="border: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <p>HAILING PORT COUNTY OR PARISH HAILING PORT STATE</p> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> <div style="border: 1px solid black; width: 40%; height: 20px;"></div> <div style="border: 1px solid black; width: 40%; height: 20px;"></div> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <p style="text-align: center; margin: 0;">USCG DOCUMENTED VESSELS ONLY</p> <table style="width: 100%; border-collapse: collapse; margin: 0;"> <tr> <td style="width: 50%; border-bottom: 1px solid black; padding: 2px;">GROSS TONS</td> <td style="width: 50%; border-bottom: 1px solid black; padding: 2px;">NET TONS</td> </tr> <tr> <td style="border: 1px solid black; height: 20px; margin: 0;"></td> <td style="border: 1px solid black; height: 20px; margin: 0;"></td> </tr> </table> </div>	GROSS TONS	NET TONS			<p>YEAR BUILT</p> <div style="border: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <p>Crew Size - Including the Captain</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin-bottom: 5px;"></div> <p>HOLD or FISH BOX CAPACITY (Pounds of Harvest)</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin-bottom: 5px;"></div>	<p>LENGTH (FEET)</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin-bottom: 5px;"></div> <p>TOTAL HORSEPOWER</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin-bottom: 5px;"></div>	<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> <p>HULL MATERIAL</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> </div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> <p>FUEL DATA</p> <p><input type="checkbox"/> DIESEL</p> <p><input type="checkbox"/> GASOLINE</p> <p><input type="checkbox"/> OTHER (DESCRIBE)</p> <p>FUEL CAPACITY - TOTAL GALLONS</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"></div> </div> <div style="border: 1px solid black; padding: 5px;"> <p>PRODUCT STORAGE (check all that apply)</p> <p><input type="checkbox"/> ON ICE IN HOLD, FISH BOX, ICE CHEST, COOLER ETC.,</p> <p><input type="checkbox"/> FREEZER</p> <p><input type="checkbox"/> LIVE WELL</p> </div>
GROSS TONS	NET TONS						

1) Please complete section 3 on this page for the Wreckfish Shareholder. If the Wreckfish Shareholder is a business, enter the Federal ID number and date the business was filed. If the owner is an individual, enter the Social Security Number and date of birth.
 2) Complete the bottom part of section 3 for a joint shareholder owner if the shares are jointly held by more than one person.

SECTION 2 - WRECKFISH SHAREHOLDER INFORMATION

Shareholder's Certificate Number

First Wreckfish Shareholder

MAILING RECIPIENT All mail about this permit will go to the person listed in this section.

Mr/Mrs/Ms	Last Name	First Name	Middle Name	Suffix - JR,SR,etc.		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Tax ID # (SSN)	Date of Birth (MM/DD/YYYY)	Area Code	Phone Number			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
Mailing Address	Apt/Suite #	City	State	County/Parish	Zip Code	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Street Address (PO Box not acceptable)	Apt/Suite #	City	State	County/Parish	Zip Code	Country
<input type="checkbox"/> Check box if same as Mailing Address	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Second Wreckfish Shareholder

MAILING RECIPIENT All mail about this permit will go to the person listed in this section.

Mr/Mrs/Ms	Last Name	First Name	Middle Name	Suffix - JR,SR,etc.		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Tax ID # (SSN)	Date of Birth (MM/DD/YYYY)	Area Code	Phone Number			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
Mailing Address	Apt/Suite #	City	State	County/Parish	Zip Code	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Street Address (PO Box not acceptable)	Apt/Suite #	City	State	County/Parish	Zip Code	Country
<input type="checkbox"/> Check box if same as Mailing Address	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

SECTION 3 - INDIVIDUAL VESSEL OWNER(S) AND LESSEE INFORMATION

Copy this page as needed to provide the required information on all persons that own or lease this vessel.

Does your USCG Documentation or State Registration show the vessel owner as a person or persons?	YES - Use this page for the vessel owner(s).	NO - Skip this page and go to the next page.
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- 1) Please complete Section 3a of this page for the owner of the vessel as shown on the USCG Certificate of Documentation or, if not documented, on the state registration certificate. If the vessel is jointly owned, please enter the information for the managing (primary) owner.
- 2) Complete Section 3b of this page for a joint owner if the vessel is jointly owned by more than one person. If the vessel is leased, complete section 3b for the person that is leasing the vessel from the vessel owner. You must submit information on each joint owner and for each lessee. If you need more spaces for additional owners or lessees, 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 your vessel's state registration does not list all owners of the vessel, also provide a copy of the vessel's title, or other documentation from the appropriate state agency that identifies all vessel owners.

Section 3a - Vessel Owner as shown on the USCG Certificate of Documentation, or for Undocumented vessels, the State Registration.

If the Documentation or State Registration shows one person's name as the owner, list it here.

MAILING RECIPIENT All mail about this permit will go to the person listed in this section.

Mr/Mrs/Ms	Last Name	First Name	Middle Name	Suffix - JR,SR,etc.		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Tax ID # (SSN)	Date of Birth (MM/DD/YYYY)	Area Code	Phone Number			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
Mailing Address	Apt/Suite #	City	State	County/Parish	Zip Code	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Street Address (PO Box not acceptable)	Apt/Suite #	City	State	County/Parish	Zip Code	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<small>Check box if same as Mailing Address</small>						

Answer questions 1 and 2 before moving on to section 4.

1. Does your USCG Documentation or State registration show more than one person as the vessel owner?	YES - Use this Page for the vessel owner(s).	NO - Do not fill out this section unless the vessel is leased.
2. Is a person or persons leasing this vessel from the vessel owner?		
YES - Use section 3b for the vessel lessee(s) information.	NO - It is a business, Skip section 3b and put lessee information in section 4b.	NO - Skip section 3b.

Section 3b - Vessel Lessee OR Additional Vessel Owner as shown on the USCG Certificate of Documentation or for undocumented vessels, the State Registration.

If the USCG Documentation, State Registration or title shows more than one person as the owner, provide the second person's information here. If there are more than two persons, photocopy this blank page to provide additional information.

For LEASED Vessels: Lease Start Date: Lease End Date:

MAILING RECIPIENT All mail about this permit will go to the person listed in this section. Mail is automatically sent to the lessee per regulations.

Mr/Mrs/Ms	Last Name	First Name	Middle Name	Suffix - JR,SR,etc.		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Tax ID # (SSN)	Date of Birth (MM/DD/YYYY)	Area Code	Phone Number			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
Mailing Address	Apt/Suite #	City	State	County/Parish	Zip Code	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Street Address (PO Box not acceptable)	Apt/Suite #	City	State	County/Parish	Zip Code	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<small>Check box if same as Mailing Address</small>						

SECTION 4 - BUSINESS VESSEL OWNER AND LESSEE INFORMATION

Copy this page as needed to provide the required information on all businesses that own or lease this vessel.

Does your USCG Documentation or State Registration show a business as the vessel owner?	YES - Use this Page for the vessel owner(s).	NO - Fill out the previous page.
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Is a business leasing this vessel from the vessel owner?	YES - Use section 4b for the vessel lessee(s).	NO - There is no lease involved - skip section 4b.
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- 1) Please complete Section 4a if the owner is a business as shown on the USCG Certificate of Documentation or, if not documented, on the state registration certificate. If the vessel is jointly owned by more than one business, please enter the information for the managing (primary) owner in section 5a.
- 2) Complete Section 4b of this page if a business is a joint owner of the vessel. OR if the vessel is leased by a business, provide the information for the business that is leasing the vessel from the vessel owner. You must submit information on each joint owner and for each lessee. If you need more spaces for additional owners or lessees, 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 your vessel's state registration does not list all owners of the vessel, also provide a copy of the vessel's title, or other documentation from the appropriate state agency that identifies all vessel owners.

Section 4a - Vessel Owner as shown on the USCG Certificate of Documentation, or for Undocumented vessels, the State Registration.

If the Documentation or State Registration shows one business name as the owner, list it here. If there are two business's that own the vessel, list the managing business in Section 4a and the second business in section 4b.

MAILING RECIPIENT All mail about this permit will go to the business listed in section 5a.

Registered Name of Business

Tax ID # (FEIN)	Date Business Formed (MM/DD/YYYY)	Area Code	Phone Number
<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; width: 40px; height: 20px;"></div>	<div style="border: 1px solid black; width: 120px; height: 20px;"></div>

Mailing Address	Apt/Suite #	City	State	County/Parish	Zip Code	Country
<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; width: 40px; height: 20px;"></div>	<div style="border: 1px solid black; width: 150px; height: 20px;"></div>	<div style="border: 1px solid black; width: 30px; height: 20px;"></div>	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	<div style="border: 1px solid black; width: 60px; height: 20px;"></div>

Street Address (PO Box not acceptable)	Apt/Suite #	City	State	County/Parish	Zip Code	Country
<div style="border: 1px solid black; height: 20px; padding-left: 5px;"><small>Check box if same as Mailing Address</small></div>	<div style="border: 1px solid black; width: 40px; height: 20px;"></div>	<div style="border: 1px solid black; width: 150px; height: 20px;"></div>	<div style="border: 1px solid black; width: 30px; height: 20px;"></div>	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	<div style="border: 1px solid black; width: 60px; height: 20px;"></div>

Section 4b - Vessel Lessee or Additional Vessel Owner as shown on the USCG Certificate of Documentation or for Undocumented vessels, the State Registration.

If the Documentation, State Registration or Title shows more than one business as the owner, provide the second owner's information here. If there are more than two businesses, photocopy the blank page to provide additional information.

For LEASED Vessels: Lease Start Date: Lease End Date:

MAILING RECIPIENT All mail about this permit will go to the business listed in section 5b. Mail is automatically sent to the lessee as required by regulations.

Registered Name of Business

Tax ID # (FEIN)	Date Business Formed (MM/DD/YYYY)	Area Code	Phone Number
<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; width: 40px; height: 20px;"></div>	<div style="border: 1px solid black; width: 120px; height: 20px;"></div>

Mailing Address	Apt/Suite #	City	State	County/Parish	Zip Code	Country
<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; width: 40px; height: 20px;"></div>	<div style="border: 1px solid black; width: 150px; height: 20px;"></div>	<div style="border: 1px solid black; width: 30px; height: 20px;"></div>	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	<div style="border: 1px solid black; width: 60px; height: 20px;"></div>

Street Address (PO Box not acceptable)	Apt/Suite #	City	State	County/Parish	Zip Code	Country
<div style="border: 1px solid black; height: 20px; padding-left: 5px;"><small>Check box if same as Mailing Address</small></div>	<div style="border: 1px solid black; width: 40px; height: 20px;"></div>	<div style="border: 1px solid black; width: 150px; height: 20px;"></div>	<div style="border: 1px solid black; width: 30px; height: 20px;"></div>	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>	<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	<div style="border: 1px solid black; width: 60px; height: 20px;"></div>

SECTION 5 - OFFICER/SHAREHOLDER INFORMATION

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

If this shareholder's certificate is owned by a business, or the vessel is owned by or leased to a business, you must complete this section for each officer or partner associated with the business. You must provide the information for all officers that are shown on your most recent annual report. If your business is structured as a corporation, you are required to identify all shareholders that own at least 1% of the shares, as well as the percentage of all shares in the corporation held by each shareholder. Please mark the box indicating there are minor shareholders if you have shareholders that individually hold less than 1% of the shares of the company. The total of all entries must be 100 percent unless you have minor shareholders.

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 their name, Social Security Numbers, address, phone number, date of birth, and position held in business.

Position held - check ALL that apply
 President/CEO Vice President Secretary Treasurer Director/Manager Shareholder Other

Percent (%) of Corporation Held

Mr/Mrs/Ms Last Name First Name Middle Name Suffix - JR,SR,etc.

Mailing Address Apt/Suite # City State County/parish Zip Code Country

Street Address (PO Box not acceptable) Apt/Suite # City State County/parish Zip Code Country
 Check box if same as Mailing Address

Tax ID # (SSN) Date of Birth Area Code Phone Number

Position held - check ALL that apply
 President/CEO Vice President Secretary Treasurer Director/Manager Shareholder Other

Percent (%) of Corporation Held

Mr/Mrs/Ms Last Name First Name Middle Name Suffix - JR,SR,etc.

Mailing Address Apt/Suite # City State County/parish Zip Code Country

Street Address (PO Box not acceptable) Apt/Suite # City State County/parish Zip Code Country
 Check box if same as Mailing Address

Tax ID # (SSN) Date of Birth Area Code Phone Number

MINOR SHAREHOLDERS - Check here if one or more shareholders individually holds shares that is less than 1% of the total shares of the company.
 TOTAL PERCENTAGE (%) of the company shares held by minor shareholder(s)

SECTION 6 - CERTIFICATION AND SIGNATURE OF APPLICANT. If the wreckfish shareholder is not the vessel owner, the undersigned certifies and documents that the vessel owner or operator is an employee, contractor or agent of the shareholder.

Shareholder's Signature Date

Print Name

INSTRUCTIONS

For a person aboard a vessel to fish for and possess wreckfish in federal waters of the South Atlantic, a commercial vessel permit for wreckfish must be issued to the vessel. To obtain a wreckfish permit, one must be a wreckfish individual transferable quota (ITQ) shareholder, an employee, agent or contractor to a wreckfish shareholder. The ITQ program requires that all wreckfish must be sold to a commercial dealer with a wreckfish dealer permit. Anyone operating under the ITQ program would also be required to have a federal commercial permit for South Atlantic snapper-grouper to be able to harvest wreckfish in excess of the bag limit and to sell wreckfish. If a person has a wreckfish permit, but no commercial permit for South Atlantic snapper-grouper species, that person cannot sell wreckfish and must adhere to the aggregate snapper-grouper bag limit, which includes wreckfish.

General Instructions:

In addition to the instructions provided herein, applicants with specific questions are encouraged to contact the Permits Office at (727) 824-5326 or toll free at (877) 376-4877 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. (Incomplete or illegible applications will be returned.)

1. Complete all applicable sections of this application form. Incomplete or illegible applications will be returned. Applications must be legible and should be filled out in ink.
2. The application fee is **\$50** and is **non-refundable**. A check or money order payable to the **U.S. TREASURY** must accompany each application. The fee for a duplicate is \$18.00.
3. Mail the application, payment, and all required supporting documentation to: **National Marine Fisheries Service (F/SER14), 263 13th Avenue South., St. Petersburg, FL 33701**. Questions may be telephoned to our toll free number at (877) 376-4877 or 727/824-5326 between 8 am - 4:30pm ET. If you would like your permit and associated documents returned to you overnight upon completion of processing, enclose a completed, pre-paid FEDERAL EXPRESS air bill, complete with your street delivery address (FEDEX does not deliver to PO Boxes), telephone number, and your FEDEX account number or major credit card number with the expiration date. Please note, using the prepaid overnight delivery option does not expedite permit processing, it can only expedite delivery upon completion of processing.

APPLICATION SECTION 1: Unless otherwise exempted by the application form, complete **all** portions of Section 1.

APPLICATION SECTION 2: Enter the information for the person(s) or business that is the Wreckfish Shareholder. All information is required. If the shareholder is an individual, provide the shareholder's date of birth and enter the taxpayer ID number (SSN). If more than one person holds the shares jointly, provide all information for all additional shareholders. If the shareholder 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 (FEIN). If corporations are in an INACTIVE status, permits will not be issued.

APPLICATION SECTION 3: For vessels owned by one or more persons, enter the information of the person(s) shown as the owner on the U.S. Coast Guard Certificate of Documentation or, if not documented, from the state registration certificate. If there is more than one vessel owner shown on the USCG documentation or the vessel is titled to more than one person, provide the required information for all listed owners. If additional space is needed, please photocopy the blank page as many times as is necessary to provide information on all vessel owners and lessees. If the owner is an individual, provide the owner's date of birth and enter the individual's taxpayer ID Number (SSN).

APPLICATION SECTION 4: For vessels owned by a business, enter the information for the business shown as the owner on the U.S. Coast Guard Certificate of Documentation or, if not documented, from the state registration certificate. If there is more than one vessel owner shown on the USCG. If additional space is needed, please photocopy the blank page as many times as is necessary to provide information on all vessel owners and lessees. Provide the date that the corporation was filed or the partnership was formed and the company's Federal Tax ID number (FEIN). If corporations are in an INACTIVE status, permits will not be issued.

APPLICATION SECTION 5: If the application is for shares that are owned by corporation, partnership, or other business entity, then information on the wreckfish shareholder's officers/ company shareholders is required. Information on all officers/ company shareholders associated with the wreckfish shareholder 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.

APPLICATION SECTION 6: The application must be signed and dated by the wreckfish shareholder. For corporate owned shares, an officer or shareholder of the company must sign and date the application.

Public reporting burden for this collection of information is estimated to average 15 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 PRA Officer, National Marine Fisheries Service, F/SER2, 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. Confidential name and address information will be released via a NOAA Fisheries 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.

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.