FEDERAL FISHERIES APPLICATION FORM
PACIFIC ISLANDS REGION
NATIONAL MARINE FISHERIES SERVICE
1845 Wasp Blvd., Building 176
Honolulu, HI 96818
Ph: (808) 725-5000; Fax: (808) 973-2941

OMB NUMBER: 0648-0490
Expires: 12/31/2014

PLEASE PRINT RESPONSES

Version: 02/19/14

American Samoa Pelagic Longline Limited Access Program
Limited Entry Permit Application

Application Type (check only one type): *Mail or deliver completed application form to Pacific Islands Region, ATTN: Permits.*

(Non-Refundable Application Processing Fee: **$55.00**, payable by check or money order to: **Department of Commerce, NOAA**. Fee charged for all permit transactions unless otherwise noted below)

PERMIT CLASS SIZE: ☐ **A** = 40' or less ☐ **B** = 40.1' – 50' ☐ **C** = 50.1' – 70' ☐ **D** = 70' or larger

☐ **Permit Renewal OR** ☐ **Additional Permit Issuance** (Please indicate permit class size):

☐ **Registration of vessel** to initial permit or re-registration (applies to vessels which have been sold or sunk): [No application processing fee charged for initial registration of vessel to initial permit]

☐ **Permit transfer** (for permits registered to vessels of size Class **A, B, C, and D**, and Class B-1, C-1, and D-1 after three years)
To: ☐ Family member ☐ Community organization ☐ Person with documented participation in the American Samoa longline fishery (participation in vessel size Class A for Class A only)

NAME: _____ Family Relationship: _____
(Print first and last names, or name of community organization) (if Family member is checked)

VESSEL NAME: _____ VESSEL NUMBER (USCG or AS): _____

VESSEL OWNER: _____ VESSEL RADIO CALL SIGN: _____

PERMIT HOLDER: _____ TAXPAYER IDENTIFICATION NUMBER:_____
(First, Middle and Last Name, or Business Name) (if a business)

PERMIT HOLDER DATE OF BIRTH (individual) or INCORPORATION (business): _____

Use the Supplementary Information Sheet to list names and addresses of owners, partners or officers.

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 permits. The primary purpose for requesting the Taxpayer Identification Number is for the collection and reporting on any delinquent amounts arising out of such person's relationship to 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.

BUSINESS MAIL ADDRESS: _____, _____, _____ _____
(Number, street, apt. no.) (City/Village) (State) (Zip)

BUSINESS PHONE: (_____)_____ (required) CELL: (_____)_____
(Please include the area code for each number)

FAX: (_____)_____ EMAIL: _____

PERMIT APPLICANT: _____ _____ DATE: _____
[if applicant is an agent, see note 4 below] (Print first, middle and last name) (Signature)

Additional permit, permit renewal or upgrade, and vessel registration: Permit holder or applicant fills out "Permit Applicant" information above.
Permit transfers: The transferring permit holder completes Permit Transferor information below and signs, and the person receiving the permit completes and signs the Permit Applicant information above.

PERMIT TRANSFEROR: _____/_____ DATE: _____
(Current holder) (Print first and last name) (Signature)

PERMIT NUMBER BEING TRANSFERRED: _____

Please submit the appropriate required documents:
1) Payment for the non-refundable application processing fee, if required,
2) A copy of the vessel's current U.S. Coast Guard Certificate of Documentation (documented vessel) or registration certificate from the state/territorial agency (undocumented vessel) to register a vessel to the permit,
3) Documentation of participation in the American Samoa longline fishery if applying for an Additional Permit, Permit Transfer, or Permit Upgrade, and
4) Signed letter from permit holder authorizing the permit applicant as their agent, if the agent is submitting the application.
If your application is incomplete, you will be notified by PIRO. You have 30 days from the date of notification to provide required documents, or your application will be considered abandoned. It is prohibited to file false information on an application for a fishing permit (50 CFR 665.15(b)).

OMB Control No. 0648-0490
Expiration Date: 12/31/2014

American Samoa
Pelagic Longline Limited Access Program
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SUPPLEMENTARY INFORMATION SHEET

Company/Corporation officers, owners, or partners:

NAME	MAILING ADDRESS	PERCENT OWNERSHIP

Check boxes are for office use only:

- ☐ Previous ownership of longline vessel: Vessel Name: _____USCG COD _____ or AS Vsl Reg. _____
- ☐ Vessel used to legally harvest Pacific pelagic management unit species with longline gear in the EEZ around American Samoa.
- ☐ Fulfilled Minimum Catch Requirements for Renewal
- ☐ Current Protected Species workshop certification (for renewal)

Documented Ownership or Evidence of Work (Participation) on AS Longline Fishing Vessel:

_____.
_____.
_____.
_____.
_____.

PAPERWORK REDUCTION ACT INFORMATION

Public reporting burden for this collection is estimated as follows: 45 minutes for American Samoa longline limited access initial permit issuance, renewal, transfer or upgrade; 2 hours for permit appeal. Send comments regarding this burden estimate and any other aspects of this collection of information, including suggestions for reducing this burden, to Regional Administrator, NOAA NMFS Pacific Islands Regional Office, 1845 Wasp Blvd., Building 176, Honolulu, Hawaii 96818.

This information is being collected to ensure accurate and timely records about the persons licensed to participate in fisheries under Federal regulations in the Western Pacific Region. This will enable NMFS and the Western Pacific Fishery Management Council to (a) determine who would be affected by changes in management; (b) inform license holders of changes in fishery regulations; and (c) determine whether the objectives of the fishery program are being achieved by monitoring entry and exit patterns and other regulatory changes on person in the regulated fisheries as well as in related fisheries. Responses to the collection are required to obtain the benefit of a license for the fishery involved (ref. 50 CFR 665.13). 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 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 Numbers.