

U.S. DEPARTMENT OF COMMERCE
National Oceanic and Atmospheric Administration
NATIONAL MARINE FISHERIES SERVICE
Pacific Islands Regional Office - SFD Permits
1845 Wasp Blvd., Bldg 176
Honolulu, Hawaii 96818
(808) 725-5190 • piro-permits@noaa.gov

OMB Control No: 0648-0490 Expires: 03/31/2024

PACIFIC ISLANDS PERMIT APPLICATION CRUSTACEAN

Please print legibly. Items marked with an asterisk (*) are required. Note required documents and instructions on page 2. Do not mail application and check. Send application via secure email and pay the non-refundable application processing fee online per instructions on page 2.

	_obster (Fee to be d Deepwater Shrimp (etermined) \$71 non-refundable application processing fe	e)			
	 Main Hawaiian Isla (Limited Entry perm American Samoa Pacific Remote Isla Guam and Norther 	it required for Lobster in Permit Area 1 is no longer and Areas	being issued.)			
*VESSEL NAME:		*/	*VESSEL OFFICIAL NO:			
		RADIO CALL SIGN:		USCG or state i	registration numbe	
*VESSEL OWNER:	First Mi	I-II- 0 I and Name on Description Alama		ID N		
	First, Middle, & Last Name or Business Name		^1	*Taxpayer ID Number (EIN or SSN)		
*DATE OF BIRTH (Individual)	OR INCORPORATI	ON (Business):	(MM/DD/Y	YYY)		
*BUSINESS CONTACT:			*TITLE:			
	First, Middle, & Last Name, if not same as vessel owner		Corporate officer, business owner, partner			
*BUSINESS MAILING ADDR	ESS:					
		Street/PO Box	City	State	ZIP Code	
*BUSINESS PHONE		CELL PHONE	(include area codes)			
*EMAIL:			_			
		undersigned, am the vessel owner or authorize ein is true, correct, and complete to the best of		ify this applica	ition on behalf of	
APPLICANT: Printed Name of Person Submitting Application Signature of Applicant			*DATE:			
Printed Name of	of Person Submitting Ap	oplication Signature of Applicant				
*APPLICANT TITLE: Ve (Check only one)	ssel owner, Corp	porate officer or partner, Designated ager	t**, or Other			
*Application is for a new pe	rmit? or a rene	wal? Previous permit number if renev	val:			

An application that is lacking required information, vessel registration or documentation, or payment will be considered incomplete. An incomplete application will be abandoned if it is not completed within 30 days following notification of the deficiency (50 CFR 665.13(c)(2)). You must inform PIRO within 15 days of any change of information on the application form (50 CFR 665.13(d)). It is prohibited to file false information on any application for a fishing permit (50 CFR 665.15(b)).

INSTRUCTIONS

Please print all information legibly. Illegible writing may cause delays or errors in permit processing. All items marked with an asterisk (*) on the form must be completed.

Permit Type: Check which permit you are applying for. You may apply for both permits with one application form, but remember to provide the fee payment for the deepwater shrimp permit. Separate permits will be issued for lobster and shrimp.

Permit Area: Check the area where you will be fishing. You may check more than one if you will be fishing other areas.

Vessel Name: Write the vessel name that is marked on the vessel and/or listed on the US Coast Guard (USCG) certificate of documentation or state/territory vessel registration form. If the vessel is undocumented and has no name, please write N/A or None.

Vessel Official No.: Write the vessel's USCG documented number or state/territory undocumented vessel registration number.

Vessel Length: Write the length overall as documented by the USCG or state/territory registration.

Radio Call Sign: Write the call sign registered with the FCC if available.

Vessel Owner: Write the official vessel owner as documented by the USCG or state/territory registration. The vessel owner is the permit holder.

Taxpayer ID Number: For individuals, this is your Social Security Number (SSN); for businesses, this is the Employer Identification Number (EIN).

Date of Birth or Incorporation: Write the date of birth for individuals, or date of incorporation for businesses.

Contact Person, Business Address, Business Phone and other contact information: Write the contact person name, contact person title, vessel owner's mailing address, and vessel owner's telephone number. These will be the address and phone number of record. Provide the cell phone number and email.

Applicant and Date: The vessel owner (if individual), officer or member of the business or corporation, or designated agent must print their name and write their signature. Write the full date (MM/DD/YYYY) when the application is signed.

Applicant Title: Check the role of the applicant. If the applicant is a designated agent, then a written, signed, and dated letter of authorization from the vessel owner naming the applicant as a designated agent is required.

Required Documents. You must submit the following with the application form.

- 1) A copy of the vessel's current U.S. Coast Guard Certificate of Documentation (documented vessel) or registration certificate from a state/territorial agency (undocumented vessel) showing the current vessel owner.
- 2) **If the Applicant is not the vessel owner, you must provide a signed letter or an email from the vessel owner authorizing the applicant to act as an agent for the vessel owner.

Send the application via secure email and pay the fee online following the instructions at https://www.fisheries.noaa.gov/pacific-islands/commercial-fishing/apply-pacific-islands-fishing-permit.

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PRIVACY ACT STATEMENT

Authority: The collection of this information is authorized under the Magnuson-Stevens Fishery Conservation and Management Act (16 U.S.C 1801 et seq.), the Western and Central Pacific Fisheries Convention Implementation Act (WCPFCIA; 16 U.S.C. 6901 et seq.), the Marine Mammal Protection Act (16 U.S.C. 1362 et seq.), and the Endangered Species Act (16 U.S.C. 1531 et seq.). The authority for the mandatory collection of the Tax Identification Number (TIN) is 31 U.S.C. 7701.

Purpose: In order to manage U.S. fisheries, the NOAA National Marine Fisheries Service (NMFS) requires the use of permits or registrations by participants in the United States. Information on NOAA Fisheries permit applicants and renewing permit holders includes vessel owner contact information, date of birth, Tax Identification Number, and vessel descriptive information. Permit holder information may be used as sampling frames for surveys.

Routine Uses: The Department will use this information to determine permit eligibility and to identify fishery participants. Disclosure of this information is permitted within NMFS offices under the Privacy Act of 1974 (5 U.S.C. 552a) to coordinate monitoring and management of fisheries and protected resources, as well as with the applicable State or Regional Marine Fisheries Commissions and International Organizations. Disclosure of this information is also subject to all of the published routine uses as identified in the Privacy Act System of Records Notice COMMERCE/NOAA-19, Permits and Registrations for the United States Federally Regulated Fisheries.

Disclosure: Furnishing this information is voluntary; however, failure to provide complete and accurate information will prevent the determination of eligibility for a permit.

PAPERWORK REDUCTION ACT INFORMATION

A Federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with an information collection subject to the requirements of the Paperwork Reduction Act of 1995 unless the information collection has a currently valid OMB Control Number. The approved OMB Control Number for this information collection is 0648-0490. Without this approval, we could not conduct this information collection. Public reporting for this information collection is estimated to be approximately 30 minutes per permit application and 2 hours per permit denial appeal, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the information collection. All responses to this information collection are voluntary. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to the NMFS Pacific Islands Regional Office at piro-permits@noaa.gov.