IMPORTANT UPDATES AND INFORMATION - PLEASE READ!

- As of September 1, 2021, you should now submit applications for new permits, transfers and renewals on line. You can submit and view your application, resolve any deficiencies, and even download for printing your open access permits. It is fast and easy, and in many cases you can submit your required information, documents, and application fees in minutes.
- ➤ PLEASE NOTE: Any user name or account created BEFORE 09/01/2021 is no longer valid.
- Only accounts created on or after 09/01/2021 will be allowed access to the new SERO On-Line Permitting System.
- ➤ Beginning 02/01/2022 the permits office NO LONGER accepts checks or money orders as payment for application fees. You are REQUIRED to make your payments through your on line account.
- ➤ Beginning 02/01/2022 The permits office no longer has an operational Fax Machine or Fax Line and will not be accepting supporting documents by fax. Supporting documents will only be accepted through your on line account or via mail, attention to your on-line application ID number.
- > To Create a new account or sign into your existing account that was created after 09/01/2021, go to: go.usa.gov/xF7Cu
- For transfers, you are still REQUIRED to mail the actual permit(s) being transferred to our office, complete with all required signatures as described on the reverse of the permit. You should submit your request for transfer through your on-line application and mail the permit(s) to our office, attention to the application ID number of your on-line application. Make a photocopy of the signed permit(s) for your records. We highly recommend that you mail the original permits using a method that can be tracked, then monitor the tracking number until delivered. The permit(s) must be mailed to: National Marine Fisheries Service (F/SER14), 263 13th Avenue South, St. Petersburg, FL 33701

IF you choose to mail a paper application to our office, your application will be scanned and converted to a digital version and processed as an on-line application. Please be aware, you are still required to have an on-line account to complete your application payment. If you mail your application, you may only make your payment through your on line account AFTER your paper application is converted, processed and found to have no payment and a deficiency email has been sent to you. If you mail a check or money order as payment - it will be returned to you.

Instructions for the Federal Permit Application for Vessels Fishing in the Exclusive Economic Zone (EEZ)

Rev 09/12/2024

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 9:00 a.m. and 4:00 p.m. ET, or visit the SERO Permits website at https://www.fisheries.noaa.gov/permits-and-forms.

Please consult the U.S. Code of Federal Regulations whose guidance for application requirements, permit eligibilities, and related information will always prevail. NMFS will return incomplete or illegible applications.

General Instructions:

What Sections do I complete?

Complete all applicable sections of this application form. All application fields should be typed or printed in ink. Specifically,

- All applicants must fill out Section 1, and Section 2 and/or Section 3.
- ➢ If the vessel's USCG documentation or state registration indicates the vessel is owned by one or more <u>individuals</u>, fill out Section 4. If the vessel is jointly owned by more than one individual, copy this page as need to provide information for all joint owners of the vessel.
- ➤ If the vessel's USCG documentation or state registration indicates the vessel is owned by one or more <u>businesses</u>, fill out Section 5. . If the vessel is jointly owned by more than one business, copy this page as need to provide information for all joint owners of the vessel.
- If the vessel is <u>leased</u> and the permit(s) will be issued to the lessee(s), complete Section 6.
- ➤ If the vessel is <u>owned</u> by a business which is owned by another business, in addition to completing Section 5, complete Section 7. In Section 7, provide information about all businesses that are parent companies of businesses that own the vessel.
- ➤ If the vessel is <u>leased</u> by a business which is owned by another business, in addition to completing Section 6, complete Section 7. In Section 7, provide information about all businesses that are parent companies of businesses that lease the vessel.
- ➤ If the vessel is owned or leased by a business, in addition to completing Section 5 and/or 6, complete Section 8. In Section 8, provide information about all individuals that are owners or officers of businesses listed in Section 5, Section 6, and/or Section 7.
- Complete Section 9 if the any owners of the businesses listed in Section 5, Section 6, or Section 7 hold an ownership percentage less than 1%. This is not common.
- Applicants of Historical Captain Endorsements for Gulf of Mexico Charter/Headboat permits, or designated operator (income qualifier) for Commercial Spiny Lobster Permits, complete section 10
- Applicants requesting a Sea Bass Pot endorsement or Golden Crab permit fill out Section 11.
- All applicants must fill out Section 12, and Section 13.

An email address is required to complete the application. You may receive updates about your permit and application status (when available). Additionally, if you check the Optional box at the bottom of the section, you may receive open access permits by email for you to print on your own. See pages 3-6 for information about specific sections of this application.

What is the Fee?

The application fee is \$25 for one fishery and \$10 for each additional fishery, as described in the table below. This application fee is collected to cover the administrative cost of processing the application, and is non-refundable.

For Gulf of Mexico Charter/Headboat permits only, there is an additional, non-refundable **\$10** fee for each decal. The fee to replace one or more permits issued to a vessel is \$18. NMFS will not refund money for denied permits. Payments must be made through your on line SERO Permits account. DO NOT send payment to our office, it will be returned to you.

<u>Permits</u>

1 = \$25 2 = \$35 3 = \$45 4 = \$55 5 = \$65 6 = \$75 7 = \$85 8 = \$95 9 = \$105 10=\$115 11=\$125 Gulf of Mexico Charter/headboat

 $\underline{\text{Decals}}1 = \$10 \ 2 = \$20$

Where do I send the application?

IF you choose to mail a paper application to our office, your application will be scanned and converted to a digital version and processed as an on-line application. You may mail the complete application and all required supporting documentation to:

National Marine Fisheries Service (F/SER14), 263 13th Avenue South, St. Petersburg, FL 33701.

Once your application is processed and permits are issued, all open access permits will be available through your on line account to download and print. Limited Access permits will be mailed to you using the U.S. Postal Service, Priority Mail. Please note using the prepaid overnight delivery option does not expedite permit processing; it only expedites delivery of your completed permit package. DO NOT MAIL A PAYMENT - It will be returned to you.

What About Reporting Compliance?

- NMFS will not renew or transfer a permit until all reporting requirements for the permit being renewed or transferred have been met (e.g., logbooks, the MRIP For-Hire telephone survey, etc.). To avoid delays, applicants are encouraged to comply with all reporting requirements before submitting a permit application.
- Send Coastal and Pelagic logbook report(s) to National Marine Fisheries Service, Research Management Division, Logbook Program, P.O. Box 491500, Key Biscayne, FL 33149-9915. Please direct questions concerning reporting Coastal and Pelagic reporting requirements to the Southeast Research Management Division at (305) 361-4581. You can also check the status for these logbooks online at https://grunt.sefsc.noaa.gov/vrsr/VesselReportingStatus.jsp.
- Send Gulf of Mexico Shrimp Landing Reports and Gulf Shrimp Vessel & Gear Characterization forms to Rebecca Smith, NMFS Galveston Laboratory, 4700 Avenue U, Galveston, TX 7755; also, Gulf Shrimp applicants need to ensure compliance with the cELB program. See https://go.usa.gov/xp8P6 for details. For information about all Gulf of Mexico Shrimp data collection programs contact Rebecca Smith at the NMFS Galveston Laboratory (409)-766-3783.
- Vessels selected for the For Hire headboat survey should contact Mr. Ken Brennan of the NMFS Southeast Fisheries Science Center at (252) 728-8618 for information about required reports.

What supporting documentation do I need?

- Documentation or state registration: Include a copy of the vessel's valid USCG Documentation or, if not required to be USCG Documented include a copy of the vessel's valid State Registration, with the application.
- ➤ Payment: .Payment must be made through your SERO On-Line Permits account. See "What is the Fee" on page 1 of these instructions for more information. If requesting Floy tags for Golden Crab or Sea Bass pots, Floy Tag will contact you directly for payment information upon processing of your application.
- ➤ Lease Agreement: Include a copy of the current lease agreement if the vessel is leased, rented, or leased-to-own. The lease must identify the vessel, the individual(s) or business(es) leasing the vessel, and the vessel owners as listed on the vessel's USCG Certificate of Documentation or, if not documented, the State Registration. The lease agreement must include a lease start date, and lease expiration date. The lease must run for a minimum of 7 months from the date your application is received. The lease may extend for many years if the lessee and lessor anticipate a long-term arrangement. Both the vessel owner(s) and the lessee(s) must sign and date the lease agreement.
- Original Permits: When transferring limited entry permits from one vessel to another, or from one owner or lessee to another owner or lessee, include the original permits being transferred. For transfers, you are still REQUIRED to mail the actual permit(s) being transferred to our office, complete with all required signatures as described on the reverse of the permit. You should submit your request for transfer through your on-line application and mail the permit(s) to our office, attention to the application ID number of your on-line application. Make a photocopy of the signed permit(s) for your records. We highly recommend that you mail the original permits using a method that can be tracked, then monitor the tracking number until delivered. The permit(s) must be mailed to: National Marine Fisheries Service (F/SER14), 263 13th Avenue South, St. Petersburg, FL 33701
- Except when transferring a permit to the same vessel owner(s) and lessee(s) (as applicable), the permit holder listed on the face of the permit must sign the back of the permit as the seller. If the permit holder is a business or organization, an officer or owner of the permit holder must sign the back of the permit as the seller. The seller's signature must be notarized.
- When transferring a Gulf of Mexico Charter/headboat permit, even to the same vessel owner(s) /lesee(s), the transferor must sign the back to affirm removal of the charter/headboat decal.
- If the transfer is not for a Gulf of Mexico Charter/ headboat permit, and the vessel owner(s)/lessee(s) will remain the same, the permit does not need to be signed.
- ➤ Highly Migratory Species (HMS) Workshop Certificate:
- To <u>renew</u> a Shark or Swordfish Directed or Incidental permit, include a copy of a valid Protected Species Safe Handling, Release, and Identification Workshop Owner's Certificate issued to the vessel owner.

- ➤ To transfer Shark or Swordfish Directed or Incidental permits, include a copy of either a valid Owner or Operator's Protected Species Safe Handling, Release, and Identification Workshop Certificate issued to the vessel owner.
- Florida Saltwater Products License: To obtain a lobster tailing permit, if the vessel will not obtain or already possess a valid commercial spiny lobster permit, include a copy of a Florida Saltwater Products License with crawfish endorsement issued to the vessel or to the applicant.
- Miscellaneous or uncommon documents: To transfer a Snapper Grouper Unlimited permit to an immediate family member, documentation proving the familial relationship will be required. To transfer a permit pursuant to will/probate of a deceased permit holder, copies of the will and court order will be required. For these sorts of unusual transfer transactions, we recommend you contact the Permits Office toll free at (877) 376-4877 to discuss the details of your particular situations.

A few words about transfers and renewals...

- Any change to the identity of the entities that own or lease the vessel, or to the vessel to which permits are issued, means the permit cannot be *renewed*. If the permit is a limited entry permit, it may be *transferred* to the new vessel or vessel owner(s) and lessee(s). If the permit is open access, a *new* permit may be obtained.
- Various restrictions apply to the renewal or transfer of limited entry permits and endorsements. Consult the applicable US Code of Federal Regulations, available online at https://www.fisheries.noaa.gov/southeast/about-us/fishing-southeast
- A vessel owner with moratorium Gulf of Mexico Coastal Migratory Pelagic Charter/Headboat and/or a Reef Fish Charter/Headboat permit(s) that transfers the permit(s) to another vessel owner or to another vessel, must remove the Federal Charter/Headboat decal from the vessel.
- With the exception of Sea Bass Pot endorsements and Golden Tilefish endorsements, NMFS cannot transfer expired permits/endorsements to a new permit holder. For all other limited entry permits, an applicant may transfer a permit only when the seller(s) signature is notarized BEFORE the expiration date, and the applicant submits an application to transfer the permit before the permit terminates, which is the date one year following the expiration date of the permit (or 6 months following the expiration date of a Golden Crab permit) and as printed on the face of the permit. An applicant may transfer a Sea Bass Pot endorsement or Golden Tilefish endorsements only when the seller(s) signature is notarized and the application is submitted BEFORE the termination date of the endorsements.

<u>APPLICATION SECTION 1 – VESSEL INFORMATION.</u>

- Complete all portions of Section 1.
- > Enter the Official Number and the length of the vessel as they appear on the U.S. Coast Guard Certificate of Documentation, or the State Registration certificate for a vessel without USCG documentation.
- Provide the Hull Identification Number (HIN) if available. The HIN is a unique number assigned by the boat builder. Most HINs are shown on the state registration or USCG documentation.
- For Highly Migratory Species (HMS) applicants only:
- An International Maritime Organization (IMO) number is required for all vessels longer than 20 meters (65 feet 8 inches) applying for HMS commercial shark, swordfish or Atlantic Tuna longline permits.
- If applying for a HMS commercial swordfish, shark, or Atlantic Tuna Longline permit without a vessel, write "NO VESSEL" in the field for USCG Official Number.
- Shark and Swordfish directed and incidental permit applicants must indicate whether the vessel fishes with or carries on board longline and gillnet gear.
- For For-Hire vessel applicants only:
- Indicate if the vessel is an uninspected vessel authorized to use a "6-pack" license, or a USCG inspected vessel, and if so, the passenger capacity of the vessel.

APPLICATION SECTIONS 2 AND 3 – Permits Requested.

- Indicate the fishery and transaction type of the permits requested. Open Access Permits are shown in section 2, and may be requested as either NEW or as a RENEWAL. Limited Access permits are shown in Section 3 and may be requested as either a RENEWAL or a TRANSFER. Indicate the permit number in the space provided.
- Commercial Spiny Lobster Income Qualification: NMFS requires an Income Qualification Affidavit with each application for a Commercial Spiny Lobster permit, as proof of meeting permit income qualification requirement of the Commercial Spiny Lobster fishery. Additional income qualification documentation may be required upon request.
- Additionally, Lobster Tailing applicants must either obtain a Commercial Spiny Lobster permit or provide a copy of a valid Florida Saltwater Product License with a crawfish endorsement, issued to the vessel or the applicant.

APPLICATION SECTION 4 -- Individuals that own the vessel.

- If the owner of the vessel as shown on the U.S. Coast Guard Certificate of Documentation or the State Registration or title of the vessel is an individual, provide information for all individuals listed. Complete section 4a, including email address, for the individual that is the owner of the vessel. For a vessel jointly owned by more than one individual, this individual will be the point of contact for all mail & email concerning the application and permits. Fill out Section 4b if the vessel is jointly owned by another individual. Copy the page as needed to list any additional vessel owners that are individuals.
- For each owner, provide the information that is listed in each section (4a and 4b if needed.)
- Indicate if the owner is a United States citizen or permanent resident alien. Note, this information will not affect eligibility to obtain a permit.

APPLICATION SECTION 5-- Businesses that own the vessel.

- If the owner of the vessel as shown on the U.S. Coast Guard Certificate of Documentation or the State Registration or title of the vessel is a business, provide information for all businesses listed. Complete section 5a, including email address for the business that the owner of the vessel. For a vessel jointly owned by more than one business, this business will be the point of contact for all mail & email concerning the application and permits. Fill out Section 5b if the vessel is jointly owned by another business. Copy the page as needed to list any additional vessel owners that are businesses.
- NMFS will not issue permits to a business with an INACTIVE status with the applicable Secretary of State.
- For each owner, provide the information that is listed in each section (5a and 5b as needed.)
- Indicate if the business was established by the laws of the United States or any state of the United States. Note, this information will not affect eligibility to obtain a permit.
- For a brief definition of applicable business types, see our frequently asked questions at https://go.usa.gov/xp8Px

<u>APPLICATION SECTION 6 – LEASE Information</u> If the vessel is leased by one or more individuals, fill out section **6A**. Copy this section as necessary to provide information about all individuals that lease the vessel.

- For each individual lessee, provide the information that is listed in section 6a.
- Indicate if the lessee is a United States citizen or permanent resident alien. Note, this information will not affect eligibility to obtain a permit.
- If the vessel is jointly leased, provide the email address in section 6a (individual) or 6b (business) for the PRIMARY lessee who will be the point of contact for all mail & email concerning the application and permits.
- If the vessel is leased by one or more businesses, provide the information that is listed in section 6b. Copy this page as necessary to provide information about all businesses that lease the vessel
- Indicate if the business was established by the laws of the United States or any state of the United States. Note, this information will not affect eligibility to obtain a permit.
- For a brief definition of applicable business types, see our frequently asked questions at https://go.usa.gov/xp8Px
- A SPECIAL NOTE ABOUT LEASES: There is no provision in the federal regulations to lease permits. Permit holders may lease a vessel and obtain permits on the vessel as the lessee. Note that vessel owners and lessees cannot independently hold permits for the same vessel at the same time

APPLICATION SECTION 7 –Businesses that Own BusinessesComplete this section for any business that owns more than 1% of any business within the ownership hierarchy of vessel owners or lessees listed in section 5a, 5b, or 6b. For every business, the sum of ownership, by either individuals or other businesses, must total 100%. Photocopy this section as necessary to provide information about all businesses within the ownership hierarchy of the vessel.

- For each business, provide the business's full name, federal tax ID number (FEIN), date the business was formed, phone number, physical and mailing address, and business type.
- Indicate if the business was established by the laws of the United States or any state of the United
- > States. Note, this information will not affect eligibility to obtain a permit.
- For a brief definition of applicable business types, see our frequently asked questions at https://go.usa.gov/xp8Px
- **Example:** If a vessel's USCG documentation indicates that the vessel is owned by Company A, and Company A is owned by Company B. Provide information about Company A in section 5 and Company B in section 7.

APPLICATION SECTION 8 – Businesses Officers and Individual Owners

Complete this section for any individual that owns more than 1% of any business within the ownership hierarchy of vessel owners or lessees, as listed in section 5a, 5b, 6b, or 7. For every business, the sum of ownership, by either individuals or other businesses, must total 100%. Photocopy this section as necessary to provide information about all businesses within the ownership hierarchy of the vessel

- For each individual owner or officer, include the entity's full name, individual tax ID number (SSN), date of birth, phone number, physical address, mailing address, sex, and race/ethnicity information.
- ➤ Indicate if the individual is a United States citizen or permanent resident alien. Note, this information will not affect eligibility to obtain a permit.
- ➤ **Example:** If a vessel's USCG documentation indicates that the vessel is owned by Company A, provide information about all owners and officers of Company A. If Company A is also owned in whole or part by Company B, complete section 8 to provide information about all individual owners and officers of Company A *and* Company B.

Photocopy this section as necessary to provide information about all businesses and their respective owners and officers that comprise the ownership hierarchy of the vessel.

APPLICATION SECTION 9 – Minor shareholders

This section is left blank for most applicants. Complete Section 9 if a business listed in Section 5a, 5b, 6b, or 7 has owners that individually own less than 1% of the business. Provide the total percentage of ownership that is individually held by owners who own less than 1%.

APPLICATION SECTION 10 -- Historical Captain or Designated Operator (Income Qualifer)

This section does not apply for most applications. Only complete this section for:

- 1) Gulf of Mexico Charter/Headboat permits with a Historical Captain endorsement, or
- 2) Commercial Spiny Lobster permit for which the income qualification requirement has been met the fishing income of a Designated Operator. A Designated Operator is a vessel operator who is neither a vessel owner nor lessee listed in Section 4a, 4b, 6a, nor an officer of a business that owns or leases the vessel as listed in 7a.

SPINY LOBSTER INCOME REQUIREMENTS

Percentage of earned income	At least 10%
Source of Earned Income	Sale of Catch
Time Frame for Qualification	The calendar year prior to application

- For each historical captain or designated operator, include the individual's full name, individual tax ID number (SSN), date of birth, phone number, physical and mailing address, and gender/ethnicity information.
- Indicate if the individual is a United States citizen or permanent resident alien. Note, this information will not affect eligibility to obtain a permit.
- Note that Designated Operators must ALSO sign the application in Section 13.

APPLICATION SECTION 11 - Sea Bass pots or Golden Crab pots

Complete this section only if you fish with pots in the snapper-grouper fishery or traps in the golden crab fishery off the southern Atlantic states.

- The Sea Bass pot fishery requires tags be ordered through NMFS. Trap Tags for the golden crab fishery do not need to be ordered through NMFS.
- To order tags from Floy Tag Inc through NMFS, complete this section with all Buoy, pot and tag information. **DO NOT SEND PAYMENT with this application as it will be returned to you.** Once your permit is issued, NMFS will submit the required tag order to Floy Tag, Inc. and Floy Tag, Inc. will contact the permit holder for payment arrangements.

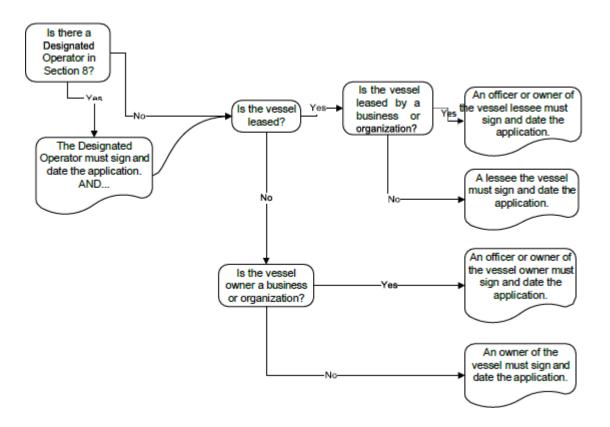
<u>APPLICATION SECTION 12 – Small Business or Organization Certification</u>

This section is required for ALL applicants. Your revenue and employment estimates for the most recent complete calendar year your business or organization was active should include the revenues and employees of <u>ALL affiliated businesses or organizations</u>. In general, businesses or organizations are affiliated with each other when one business or organization controls or has the power to control another business or organization, or a third party controls or has the power to control both. Specifically, businesses or organizations are considered to be affiliated if they have <u>50% or more ownership in common</u>. For e.g., if the same individual or individuals own or co-own multiple businesses, those businesses would be considered affiliated and thus should be treated as a single operation for the purpose of estimating annual gross revenues and employment.

<u>APPLICATION SECTION 13 – SIGNATURE FOR APPLICATION</u>

- If the vessel is leased, a lessee or a lessee's representative must sign the application as the applicant. If the vessel is not leased, a vessel owner or an owner's representative must sign the application as the applicant.
- If the vessel has a Designated Operator/Income Qualifier for Commercial Spiny Lobster permits, the Designated Operator must *also* sign and date the application.

The following flowchart describes how to identify who needs to sign the application



KNOWINGLY SUPPLYING FALSE INFORMATION OR WILLFULLY OVERVALUING ANY FISHING INCOME TO OBTAIN A PERMIT IS A VIOLATION OF FEDERAL LAW PUNISHABLE BY A FINE AND/OR IMPRISONMENT.

Public Burden Statement - 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 0648-0205. Without this approval, we could not conduct this survey or information collection. Public reporting for this information collection is estimated to be approximately 50 minutes per response, 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 required to obtain benefits. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to the: PRA Officer, National Marine Fisheries Service, F/SER26, 263 13th Avenue South, St. Petersburg, FL 33701.

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 High Seas Fishing Compliance Act, the Tuna Conventions Act of 1950, the Antarctic Marine Living Resources Convention Act, the Western and Central Pacific Fisheries Convention Implementation Act (16 U.S.C. 6901 et seq.), the Marine Mammal Protection Act, the Endangered Species Act and the Fur Seal Act. 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 National Marine Fisheries Service (NMFS) requires the use of permits or registrations by participants in the United States. Information on NMFS permit applicants and renewing holders includes vessel owner contact information, date of birth, TIN and vessel descriptive information. Permit holder information may be used as sampling frames for surveys, as part of Fishery Management Council (FMC) analysis to support FMC decisions.

Routine Uses: The Department will use this information to determine permit eligibility and to identify fishery participants. Disclosure of this information is permitted under the Privacy Act of 1974 (5 U.S.C. Section 552a), to be shared within NMFS offices, in order to coordinate monitoring and management of sustainability 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.

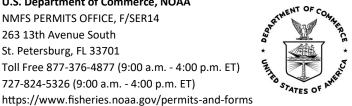
Disclosure: Furnishing this information is voluntary; however, failure to provide complete and accurate information will prevent the determination of eligibility for a permit.

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. Non-confidential information may be released via a NOAA Fisheries website. Non-confidential information means: Name, Street Address, City, State, Zip code, Effective Date of Permit, Permit Types, Vessel Name, Vessel Identification Number, and in the case of a "for hire" vessel the Passenger Capacity, or individual, corporate and lease holders of permits. 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.

Providing Demographic Information - NMFS has a continuing commitment to monitor the operation of its review and issuance processes to identify and address any inequities based on the sex, race, or ethnicity of its permit applicants. To gather information needed for this important task, the applicant(s) should submit the requested demographic information for each owner or officer listed on the permit application. Submission of the requested information is voluntary. Demographic data will not be used in the determination of whether to issue a permit.

U.S. Department of Commerce, NOAA

NMFS PERMITS OFFICE, F/SER14 263 13th Avenue South St. Petersburg, FL 33701 Toll Free 877-376-4877 (9:00 a.m. - 4:00 p.m. ET) 727-824-5326 (9:00 a.m. - 4:00 p.m. ET)



FEDERAL PERMIT APPLICATION FOR **VESSELS FISHING IN THE EXCLUSIVE ECONOMIC ZONE (EEZ)**

FOR OFFICE USE ONLY—DATE RECEIVED

FOR OFFICE USE ONLY

Application ID

REMEMBER TO SEND A COPY of the current (not expired) United States Coast Guard (USCG) Certificate of Documentation or a copy of the State Vessel Registration. Do not send the original. If the vessel's state registration does not list all owners, also provide a copy of the vessel's title, or other documentation from the appropriate state agency, that identifies all vessel owners.

SECTION 1 -	VESSEL INFORMATI	ON	
Official Number From USCG Certificate Of Documentation (If the vessel is documented)	Year Built	Length (ft)	Total Horsepower
State Registration Number (as applicable)		size—Including the Captain,	
Vessel Name	ALL APPLICANTS—HOLD	or FISH BOX CAPACITY: Estimoduct can you bring to the dock	
Hull Identification Number (HIN)	Hull Material	Fuel Data	Product Storage (check all that apply)
Hailing Port City Hailing Port County Or Parish Hailing Port State USCG DOCUMENTED VESSELS ONLY Gross Tons Net Tons International Maritime Organization (IMO) Number	FIBERGLASS WOOD STEEL ALUMINUM OTHER (DESCRIBE)	GASOLINE OTHER (DESCRIBE) Fuel Capacity - Total Gallons	ON ICE IN HOLD, FISH BOX, ICE CHEST, COOLER, ETC FREEZER LIVE WELL
Passenger Capacity Data For Charter Vessels/Headboats Only UNINSPECTED VESSEL - "6-PACK" USCG INSPECTED VESSEL: Specify Passenger Capacity as listed on the USCG Certificate of Inspection, not including Capt.	This vessel is used MOSTLY for (select only one) Commercial Fishing Charter Headboat	For Shark and Swordfis Incidental Permit Appli vessel fish with, or carr longline or gillnet gear Yes Reminder: If yes, includ "Protected Species Relation of the company	cants Only: Does your y onboard, either No de a copy of your ease, Identification

SECTION 2 - OPEN ACCESS PERMITS AND ENDORSEMENTS

Payment Reminder: All applications must include payment of a non-refundable application fee in the form of a check or money order made payable to the U.S. Treasury. The fee is \$25.00 for the first permit and \$10.00 for each additional permit or endorsement requested on this application. A separate decal is now required for each Gulf of Mexico charter/headboat permit. The fee is \$10 per decal per permit. The fee schedule is found with the Gulf of Mexico Charter/headboat permit requests on page 3.

NEW

RENEW

FEE SCHEDULE FOR PERMITS AND ENDORS	SEMENTS:
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OPEN ACCESS COMMERCIAL PERMITS

ATLANTIC DOLPHIN/WAHOO (ADW)

INSTRUCTIONS: Find the permits in the left column and mark the check box beside that fishery to indicate what transaction(s) you want.

SPINY LOBSTER (LC) (Not required for the EEZ off Florida)		
SPINY LOBSTER TAILING (LT) You must have an LC permit OR provide your FL SPL information below.		
SPANISH MACKEREL (SM)		
ROCK SHRIMP - CAROLINAS ZONE (RSCZ) An Operator Card is required		
SOUTH ATLANTIC PENAEID SHRIMP (SPA)		
GULF ROYAL RED SHRIMP ENDORSEMENT (GRRS) You must have a valid Gulf of Mexico Shrimp permit		
HMS COMMERCIAL CARIBBEAN SMALL BOAT PERMIT (CCSB) Valid only in U.S. Caribbean (Puerto Rico and USVI)		
SMOOTH HOUND SHARK (SHS)		
OPEN ACCESS CHARTER/HEADBOAT PERMITS	NEW	RENEW
ATLANTIC CHARTER/HEADBOAT FOR DOLPHIN/WAHOO (CDW) An Operator Card is required		
SOUTH ATLANTIC CHARTER/HEADBOAT FOR COASTAL MIGRATORY PELAGICS (CHS)		
SOUTH ATLANTIC CHARTER/HEADBOAT FOR SNAPPER-GROUPER (SC)		
information: (vi) A sworn statement by the applicant for a vessel permit certifying that at least 10 percent of his o was derived from commercial fishing, that is, sale of the catch, during the calendar year preceding the application supplying false information or willfully overvaluing any fishing income for the purpose of obtaining a permit is a v punishable by a fine and/or imprisonment. The affidavit below fulfills this requirement to obtain a Spiny Lobster The following information applies to my income qualification for the Spiny Lobster fishery: I,, hereby declare under penalty of perjury that the	n. " Knowin iolation of Permit	gly Federal law
true and correct (28 USC 1746; 18 USC 1621; 18 USC 1001; 16 USC 1857). I agree to provide the necessary	y documei	ntation to
prove that I met the earned income requirement when so requested by the National Marine Fisheries Ser		
Executed on(date signed). Printed Name Signature		
Business Name (if Applicable)Type of business (if Applicable)		
Position In Business (if Applicable)		
FOR LOBSTER TAILING PERMIT APPLICANTS ONLY LOBSTER TAILING APPLICANTS: To obtain a lobster tailing permit you must possess a Florida Saltwater Products Restricted Species and Crawfish endorsements. If you do not have a Florida SPL with Restricted Species and Crawfust possess or simultaneously obtain a valid Federal Spiny Lobster (LC) permit. You must provide a copy of your Florida SPL if you do not have a Federal Spiny Lobster (LC)	wfish Endo	rsements, you
Saltwater Products License Number Saltwater Products License Expiration Date Crawfish Endorsement Number		

SECTION 3 - LIMITED ACCESS/MORATORIUM PERMITS AND ENDORSEMENTS

Payment Reminder: All applications must include payment of a non-refundable application fee in the form of a check or money order made payable to the U.S. Treasury. Please refer to the fee schedule in section 2 of the application.,

INSTRUCTIONS: Find the permits in the left column and mark the check box beside that fishery to indicate what transaction(s) you want.

GULF CHARTER/HEADBOAT FOR REEF FISH (RCG)

PERMIT

ING MACKEREL (KM) SILLNET FOR KING MACKEREL (GN)		
ILLNET FOR KING MACKEREL (GN)		
SULF OF MEXICO SHRIMP (SPGM)		
SULF OF MEXICO COMMERCIAL REEF FISH (RR)		
ASTERN GULF OF MEXICO REEF FISH BOTTOM LONG LINE ENDORSEMENT (RRLE)		
OCK SHRIMP (SOUTH ATLANTIC EEZ) (RSLA) An Operator Card is required		
OUTH ATLANTIC GOLDEN CRAB (GC)		
OUTH ATLANTIC UNLIMITED SNAPPER-GROUPER (EXCLUDING WRECKFISH) (SG1)		
OUTH ATLANTIC 225 LB TRIP LIMIT SNAPPER-GROUPER (EXCLUDING WRECKFISH) (SG2)		
OUTH ATLANTIC SEA BASS POT ENDORSEMENT (SBPE)		
OUTH ATLANTIC GOLDEN TILEFISH ENDORSEMENT (GTFE)		
WORDFISH DIRECTED (SFD)		
WORDFISH HANDGEAR (SFH)		
WORDFISH INCIDENTAL (SFI)		
HARK DIRECTED (SKD)		
HARK INCIDENTAL (SKI)		
TLANTIC TUNA LONGLINE (ATL) Must have either SFI or SKI and either SFD or SKD		

_		
	SECTION 4 - INDIVIDUAL VESSEL OWNER(S) INFORMATION	
Reg	tion 4a: Primary or Sole Owner: Complete this section if there is one or more individual shown on the USCG documentation, Striction or title as the registered owner of the vessel. Select only ONE mailing recipient. ILING RECIPIENT - By Default, All mail about this permit will go to the individual listed in Section this Section unless the vessel in	
	REQUIRED INFORMATION - Permits cannot be issued without this information. Is this individual a United States Citizen YES NO	
	or permanent resident alien? Last Name First Name Middle Name Suffix - Jr, Sr,	etc.
	If you are operating under a different name, what is your Doing Business As (DBA) name?	
	Individual Tax ID Number (SSN) Date of Birth (MM/DD/YYYY) Area Code Phone Number	
	Email Address	
	Mailing Address Apt # City State County/Parish Zip Code Country	у
	Check box if the Physical Address is the same as the mailing address.	
	Physical Address (PO Box not acceptable) Apt # City State County/Parish Zip Code Country	y
	DEMOGRAPHIC INFORMATION: NMFS is committed to monitoring its review and issuance processes to identify an any inequities based on the sex, race, or ethnicity of its permit applicants. The applicant(s) should submit the requeste graphic information for each owner or officer listed on the permit application to gather information needed for this impossible submission of the requested information is voluntary. Demographic data will not be used to determine whether to issue	ed demo- ortant task.
	What is this individual's Sex? Male Female	
	What is this individual's race or ethnicity? Mark all that apply White Black or African American Native Hawaiian or Pacific Islan American Indian or Alaska Native Middle Eastern or North African	der

If there are additional individual vessel owners listed on the vessel's USCG Certificate of Documentation, State Vessel Registration or Vessel Title, copy this page and provide the information for each additional vessel owner.

SECTION 5 - BUSINESS VESSEL OWNER(S) INFORMATION

Section 5a: Primary or Sole Owner: Complete this section if there is one or more businesses shown on the USCG Documentation, State Registration or Title as the registered owner of the vessel. **NOTE—MAILING RECIPIENT** - By default, All mail about this permit will go to the business listed in Section 5a unless the vessel is leased.

e of ness:	S Corporation C Corporation	Cooperative Limited Liabi		OtherPartnership	the la	this Business pro lws of the United United States?	perly establis States or an	y state YE
COMPLI	ETE Registered Nan	ne of Business		State wh	nere the Bus	iness is originally	registered	
Federal I	Employer Tax ID Nu	umber (FEIN)	Date Busir	ness Formed (MM/	DD/YYYY)	Area Code P	hone Numbe	r
Email Ad	ldress							
Mailing	Address		Apt #	City	State	County/Parish	Zin Code	Country
	71441 000						2.6 coac	
Chec	ck box if the Physic	al Address is the	same as the	mailing address.				
	Address (PO Box no		Apt #	_	State	County/Parish	Zip Code	Country
ection 5	b: Joint Owner: Col ne registered joint o	mplete this sectio wner of the vesse	on if there is	another business	shown on th	ne USCG Docume	ntation, Stat	e Registration or
REQUI	b: Joint Owner: Conne registered joint of the register	owner of the vesse	annot be is	sued without this Other Partnership	information. Was t the la of the	his Business pro ws of the United United States?	perly establis States or an	hed by YES
REQUI of ess:	RED INFORMAT S Corporation	ION - Permits ca Cooperative Limited Liabi	annot be is	sued without this Other Partnership	information. Was t the la of the	his Business pro ws of the United	perly establis States or an	hed by YES
REQUI of ess:	IRED INFORMAT S Corporation C Corporation ETE Registered Name	ION - Permits ca Cooperative Limited Liabi	annot be is	sued without this Other Partnership State wh	information. Was t the la of the	his Business pro ws of the United United States? iness is originally	perly establis States or an	hed by YES y state NO
REQUI of ess:	RED INFORMAT S Corporation C Corporation	ION - Permits ca Cooperative Limited Liabi	annot be is	sued without this Other Partnership	information. Was t the la of the	his Business pro ws of the United United States? iness is originally	perly establis States or and registered	hed by YES y state NO
REQUI of ess: COMPLE	S Corporation C Corporation ETE Registered Name	ION - Permits ca Cooperative Limited Liabi	annot be is	sued without this Other Partnership State wh	information. Was t the la of the	his Business pro ws of the United United States? iness is originally	perly establis States or and registered	hed by YES y state NO
REQUI of ess: COMPLE	RED INFORMAT S Corporation C Corporation ETE Registered Name Employer Tax ID Numbers	ION - Permits ca Cooperative Limited Liabi	annot be is	sued without this Other Partnership State wh	information. Was t the la of the	his Business pro ws of the United United States? iness is originally	perly establis States or an registered none Number	hed by YES y state NO
REQUI of ess: COMPLE Email Ad Mailing A	IRED INFORMAT S Corporation C Corporation ETE Registered Name Employer Tax ID Number Idress Address	ION - Permits ca Cooperative Limited Liabi ne of Business Imber (FEIN)	Date Busin	State where sees Formed (MM/	information. Was t the la of the	his Business pro ws of the United United States? iness is originally Area Code Pl	perly establis States or an registered none Number	hed by YES y state NO
REQUI of ess: COMPLE Email Ad Mailing	RED INFORMAT S Corporation C Corporation ETE Registered Name Employer Tax ID Numbers	Cooperative Limited Liabi ne of Business Imber (FEIN)	Date Busin	State where sees Formed (MM/	information. Was t the la of the	his Business pro ws of the United United States? iness is originally Area Code Pl	registered none Number	hed by YES y state NO

If there are additional Business vessel owners listed on the vessel's USCG Certificate of Documentation, State Vessel Registration or Vessel Title, copy this page and provide the information for each additional vessel owner.

SECTION 6A - LEASE INFORMATION—INDIVIDUAL OR JOINT INDIVIDUAL LESSEE

If the permit holder is leasing the vessel from the vessel owner in order to assign permits to the vessel, provide the lease information in this section. You must provide a copy of the lease agreement. The term of the lease must be a minimum of 7 months. **Please Note:** Any permits already held and assigned to the vessel by the vessel owner will be ended and will not be valid for fishing if the vessel is leased to another permit holder whose permits are assigned to the vessel.

REQUIRED INFORMATION - Permits can	not be iss	sued without this infor	mation.			
Is this individual a United States Citizen or permanent resident alien?		NO				
Last Name	First N	lame		Middle Name		Suffix - Jr, Sr, etc.
If you are operating under a different name, what is your Doing Business As (DBA) name?						
Individual Tax ID Number (SSN)	Date of E	Birth (MM/DD/YYYY)	Area C	ode Phone Nu	ımber	
Email Address						
Mailing Address	Apt #	City	State	County/Parish	Zip Code	Country
	ــــا ا					
Check box if the Physical Address is the sa Physical Address (PO Box not acceptable)	me as the Apt #	e mailing address. City	State	County/Parish	7in Code	e Country
riffsical Address (FO Box Hot acceptable)	Apt #	City	State	County/Farisii	Zip coue	Country
DEMOGRAPHIC INFORMATION: NMFS is any inequities based on the sex, race, or ethe araphic information for each owner or officer submission of the requested information is very the second of the requested information.	nicity of i	its permit applicants. ⁻ In the permit applicatio	The <i>app</i> <i>n to</i> gat	<i>licant(s) should</i> her information	<i>submit tl</i> needed f	he requested demo or this important ta
What is this individual's Male Fer	nale					
What is this white white or Latino Hispanic or Latino	<u> </u>	k or African American		H		Pacific Islander
Mark all Hispanic or Latino	Ame	erican Indian or Alaska N	vative	Other		

If there are additional individual vessel lessees, copy this page and provide the information for each additional vessel lessee.

A note about leasing vessels—If the vessel owner already has permits issued by our office assigned to this vessel and leases the vessel to a different permit holder to assign a one or more different permits to the vessel, those permits held by the vessel owner WILL NOT BE VALID for fishing.

SECTION 6B - LEASE INFORMATION—BUSINESS LESSEE

If the permit holder is leasing the vessel from the vessel owner in order to assign permits to the vessel, provide the lease information in this section. You must provide a copy of the lease agreement. The term of the lease must be a minimum of 7 months. **Please Note:** Any permits already held and assigned to the vessel by the vessel owner will be ended and will not be valid for fishing if the vessel is leased to another permit holder whose permits are assigned to the vessel.

MAILING RECIPIENT - Because the vessel is leased to a business, all mail about this permit will go to the Business listed in this section.

Lease start dat	e:	Lease end date:			
REQUIRED INFORMATION - Permits Type of business: C Corporation Limited Li	ve Other	Was the la	this Business pro ws of the United United States?	perly establis I States or an	shed by YES y state NO
Federal Employer Tax ID Number (FEIN)	Date Business Form	State where the Bus ed (MM/DD/YYYY)		registered	r
Mailing Address Check box if the Physical Address is the Physical Address (BO Roy not accontable)	J	State ddress.	County/Parish County/Parish		Country
Physical Address (PO Box not acceptable)	Apt # City	State	County/Parish	zip code	Country

A note about leasing vessels—If the vessel owner already has permits issued by our office assigned to this vessel and leases the vessel to a different permit holder to assign a one or more different permits to the vessel, those permits held by the vessel owner WILL NOT BE VALID for fishing.

SECTION 7 - BUSINESSES THAT OWN BUSINESSES

Complete this section for each business that owns 1% or more of a business listed in sections 5a, 5b and/or 6b. Copy this section as needed.

Registered Name of Business Federal Employer Tax ID Number (FEIN) Date Business Formed (MM/DD/YYYY) Area Code Phone Number Email Address Mailing Address Apt # City State County/Parish Zip Code Country Check box if the Physical Address is the same as the mailing address. Physical Address (PO Box not acceptable) Apt # City State County/Parish Zip Code Country]
Email Address Mailing Address Apt # City State County/Parish Zip Code Country Check box if the Physical Address is the same as the mailing address.]
Mailing Address Apt # City State County/Parish Zip Code Country Check box if the Physical Address is the same as the mailing address.]
Mailing Address Apt # City State County/Parish Zip Code Country Check box if the Physical Address is the same as the mailing address.]
Check box if the Physical Address is the same as the mailing address.]
]
	_
REQUIRED INFORMATION - Permits cannot be issued without this information.	
Type of business: Cooperative Other Was this Business properly established by the laws of the United States or any state	res NO
Registered Name of Business	
Federal Employer Tax ID Number (FEIN) Date Business Formed (MM/DD/YYYY) Area Code Phone Number]
Email Address]
Mailing Address Apt # City State County/Parish Zip Code Country	1
Check box if the Physical Address is the same as the mailing address.]
Physical Address (PO Box not acceptable) Apt # City State County/Parish Zip Code Country	-

The officers and/or shareholders for each business must be provided by completing section 8 of this application.

SECTION 8 - BUSINESS OFFICERS AND BUSINESS OWNERS

Complete this section by providing information on all individual officers and owners that own 1% or more of any business listed in sections 5a, 5b, 6b, and 7.

REQUIRED INFORMATION - Permits can	not be issued without this informatio	on.
Business for which this individual is an officer/or	wner of:	
Position Held - Check ALL That Apply President/CEO Vice President Sometimes Some Some Some Some Some Some Some Some	ecretary Treasurer Director	or/ Manager Shareholder Other
Is this individual a United States Citizen or permanent resident alien?	S NO	
Last Name	First Name	Middle Name Suffix - Jr, Sr, etc.
If you are operating under a different name, what is your Doing Business As (DBA) name?		
Individual Tax ID Number (SSN)	Date of Birth (MM/DD/YYYY) Are	a Code Phone Number
Email Address		
Mailing Address	Apt # City Sta	te County/Parish Zip Code Country
Check box if the Physical Address is the sa	ame as the mailing address.	
Physical Address (PO Box not acceptable)	Apt # City Sta	te County/Parish Zip Code Country
any inequities based on the sex, race, or etc graphic information for each owner or office Submission of the requested information is	hnicity of its permit applicants. The r r listed on the permit application to	w and issuance processes to identify and address applicant(s) should submit the requested demogather information needed for this important task of be used to determine whether to issue a permit.
Sex? Male Fe	maie	
What is this individual's race or ethnicity? Hispanic or Latino that apply Asian	Black or African American American Indian or Alaska Nativ Middle Eastern or North African	
SECTION 9 - OWNER INFORM	ATION FOR UNNAMED MINOR	R SHAREHOLDERS OF BUSINESSES
MINOR OWNERS - Check here if one or more o	·	shares that are less than 1% of the total business shares.

The total percentage of ownership of the business MUST equal 100%. If there are additional officers and /or shareholders, copy this page and provide the information for each additional officer/shareholder.

SECTION 10 - DESIGNATED OPERATOR (INCOME QUALIFIER who is not the permit holder)

A Designated Operator MUST sign Section 13 as the operator along with the applicant AND complete the income Qualification Affidavit in Section 2 of the application.

Is this individual a United or permanent resident ali	States Citizen YES					
Last Name		First Name		Middle Name	S	Suffix - Jr, Sr, etc.
If you are operating ur what is your Doing Bus	der a different name, siness As (DBA) name?					
Individual Tax ID Num	ber (SSN)	Date of Birth (MM/	DD/YYYY) Area Co	ode Phone Nu	ımber	
Email Address						
Mailing Address		Apt # City	State	County/Parish	Zip Code	e Country
Check box if the Pl	nysical Address is the sa	ame as the mailing a	ldress.	_		_
Physical Address (PO B	ox not acceptable)	Apt # City	State	County/Parish	Zip Code	e Country
any inequities based graphic information fo	on the sex, race, or e or each owner or offic quested information is	ethnicity of its permit eer listed on the perr	applicants. The ap nit application to ga	plicant(s) should ther information	<i>d submit</i> n needed	for this important to
any inequities based graphic information fo Submission of the red What is this individual's	on the sex, race, or e or each owner or offic quested information is	ethnicity of its permit eer listed on the perr s voluntary. Demogr Female Black or Africa American Indi	applicants. The ap nit application to ga aphic data will not l	plicant(s) should ther information be used to determine the used t	d submit n needed rmine wh	the requested dem for this important to
any inequities based graphic information for Submission of the result what is this individual's Sex? What is this individual's race or ethnicity? Mark all	on the sex, race, or each owner or office quested information is Male Male Hispanic or Latino Asian	ethnicity of its permit eer listed on the perr s voluntary. Demogr Female Black or Africa American Indi	applicants. The ap nit application to ga aphic data will not b an American an or Alaska Native n or North African	plicant(s) should ther information be used to determine the used t	d submit n needed rmine wh	the requested dem for this important to the ther to issue a pe
any inequities based graphic information for Submission of the red What is this individual's Sex? What is this individual's race or ethnicity? Mark all that apply	on the sex, race, or each owner or office quested information is Male Male Hispanic or Latino Asian	ethnicity of its permit eer listed on the perr s voluntary. Demogr Female Black or Africa American Indi Middle Easter	applicants. The ap nit application to ga aphic data will not k an American an or Alaska Native n or North African	plicant(s) should ther information be used to determine the used t	d submit n needed rmine wh	the requested dem for this important to the ther to issue a pe
any inequities based graphic information for Submission of the results of the results of the sex? What is this individual's Sex? What is this individual's race or ethnicity? Mark all that apply COMPLET Tag cost is \$3.50 per this application as it Floy Tag , Inc. and Florence or ethic in the second	Male White Hispanic or Latino Asian SECTION TE THIS SECTION ONLY Tag. NMFS is NO LON will be returned to y oy Tag, Inc. will conta	ethnicity of its permit ter listed on the permit soluntary. Demogrates voluntary. Demogrates and the permit between the permit holds. The sea bass por a second permit holds. The permit holds.	applicants. The applicants applicants. The application to gate application to gate applic data will not be applicated and an or Alaska Native an or North African an or North African application of BASS POTS OR IF YOU Tag Payments. DC mit is issued, NMFS	plicant(s) should ther information be used to determine used to determine the used to de	d submit needed rmine wh	the requested dem for this important to the rether to issue a per or Pacific Islander TRAPS.
any inequities based graphic information for Submission of the results of the service what is this individual's sex? What is this individual's race or ethnicity? Mark all that apply COMPLET Tag cost is \$3.50 per this application as it floy Tag , Inc. and Flored tags for:	Male Male Male Male F White Hispanic or Latino Asian SECTION TE THIS SECTION ONLY Tag. NMFS is NO LONG will be returned to y oy Tag, Inc. will conta	ethnicity of its permit eer listed on the perris s voluntary. Demogr Female Black or Africa American Indi Middle Easter 11 - SEA BASS PO Y IF YOU HAVE SEA NGER accepting Floy you. Once your period act the permit holder Golden Crab Traps	applicants. The applicants applicants to gate application to gate applic data will not be applicated and an or Alaska Native an or North African an or North African application of BASS POTS OR IF YOU Tag Payments. DO mit is issued, NMFS ar for payment arrangement arrangement arrangement arrangement application of the payment arrangement arr	plicant(s) should ther information be used to determine used to determine the used to de	d submit needed rmine wh	the requested dem for this important to the rether to issue a per or Pacific Islander TRAPS.
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any inequities based graphic information for Submission of the results of the results of the sex? What is this individual's Sex? What is this individual's race or ethnicity? Mark all that apply COMPLET Tag cost is \$3.50 per this application as it floy Tag , Inc. and Fl I need tags for: What color are your limits of the second secon	Male Male Male Mite Hispanic or Latino Asian SECTION THIS SECTION ONLY Tag. NMFS is NO LON Will be returned to y Oy Tag, Inc. will conta	ethnicity of its permit ter listed on the permit soluntary. Demogrates voluntary. Demogrates and the permit soluntary. Demogrates and the permit holder or Golden Crab Traps or Golden Crab Traps	applicants. The applicants applicants to gate application to gate application to gate applic data will not be applicated and an or Alaska Native an or North African are applicated as a Parameter of Tag Payments. DC anit is issued, NMFS are for payment arrange.	plicant(s) should ther information be used to determine used to determine used. Native House The Other Send Traps O NOT SEND FLOS will submit the ingements.	EN CRAB DY TAG P e require ass Pots Height	the requested dem for this important to the rether to issue a per or Pacific Islander TRAPS.

SECTION 12 - SMALL BUSINESS OR ORGANIZATION CERTIFICATION

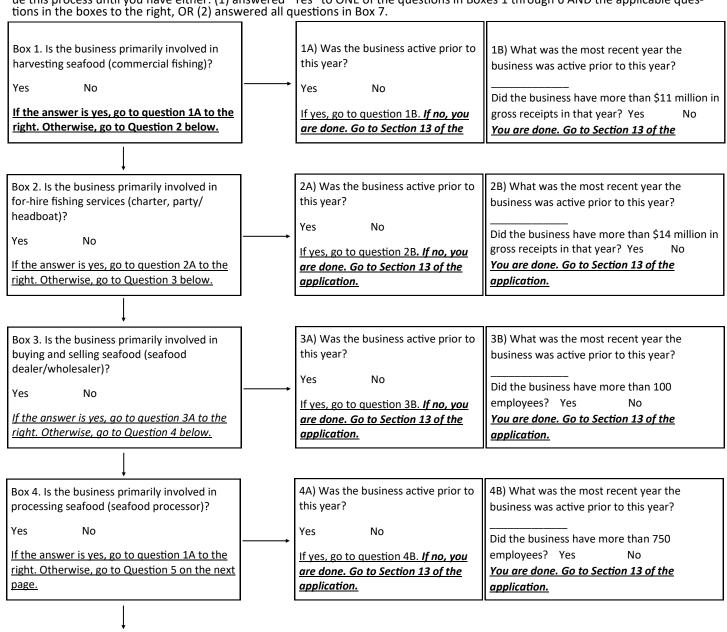
ALL applicants must complete this section

Next page

- For vessels that are leased, complete this section for business(es), including sole proprietorship(s), or organization(s) that lease the vessel.
- For vessels that are not leased, complete this section for business(es), including sole proprietorship(s), ororganization(s) that own the vessel (i.e., the business(es), including sole proprietorship(s), or organization(s) that appear on the vessel's USCG documentation or state registration).

Information needed to complete this section: Please estimate your annual gross revenues (sales) for the most recent calendar year your business or organization was active prior to this year. Your primary activity is the activity that generated the greatest percentage of annual gross revenues in the most recent complete calendar year the business or organization was active. Review the business/organization descriptions in Boxes 1 through 7 and identify the one that describes the applicant's primary activity. If the business is primarily a seafood dealer or processor, estimate the number of employees for the most recent calendar year your business or organization was active prior to this year. Include all full-time, part-time, and temporary employees in your estimate, but do not include crew that work on any vessels owned by the business or organization or its affiliates. Your estimates should account for the revenues and employees of ALL businesses and organizations with which your business or organization is affiliated. See the instructions at the beginning of the application package for more information about affiliation. If you have questions about affiliation and how it applies in your case, please call 727-824-5305 and ask for one of our Office's economists.

How to fill out the form: Start with Box 1. If the answer to the question in Box 1 is "Yes," check "Yes" and answer the questions in the box to the right and follow the instructions in that box. If the answer to Question 1 is "No," check "No" and go to Box 2. Continue this process until you have either: (1) answered "Yes" to ONE of the questions in Boxes 1 through 6 AND the applicable questions in the boxes to the right, OR (2) answered all questions in Box 7.



SECTION 12 - SMALL BUSINESS OR ORGANIZATION CERTIFICATION (Continued from previous page)

Conservation and W Non-Profit Organiza Yes No If the answer is yes,	zation an Environmen Vildlife, or Professiona ation? go to question 5A to to Question 6 below	the		?	5B) What was the most recent year the organization was active prior to this year? Did the organization have more than \$15 Million in gross receipts? Yes No You are done. Go to Section 13 of the application.
l l					
If you are here, you have answered NO to Questions 1 thru 5. If you answered one of those questions YES, return to that question and finish there.					
6) The business or organization must be primarily involved in another industry not related to fishing or seafood. Refer to SBA's list of North Ameri-					
can Industry Classification System (NAICS) codes (see https://www.sba.gov/document/supporttable-size-standards) and enter the NAICS code					
for your primary activity here:					
Based on the applicable SBA size standard, check the appropriate box to indicate if the business or organization is Large or Small and					
report the year on which that conclusion was based.					
Large	Small	Year:	You are done. Go to Section 13 of the application.		
SECTION 13 - SIGNATURE FOR APPLICATION - REQUIRED					
The undersigned certifies under penalty of perjury that the foregoing information is true and correct (28 USC 1746; 18 USC 1621; 18 USC 1001, 16 USC 1857). Further, the undersigned certifies that if a spiny lobster tailing permit is requested, the applicant routinely fishes commercially in Federal waters on trips of up to 48 hours or more and that such fishing activity requires the separation of the tail and carapace to maintain quality product.					
Please note: If the vessel listed in Section 1 is leased, the applicant who signs below must be an individual named as a lessee in Section 6a, or an officer or shareholder of the lessee as listed in Section 7b, with that individuals information listed in section 8. If the vessel listed in Section 1 is not leased, the applicant must be an individual named as an owner in Section 4, or an officer or shareholder of the owner as listed in Section 8.					
Applicant Signature			Date		
(Vessel Owner from Section 4, Company Officer Shareholder from Section 8,					
OR Lessee From Section 6)					
Print Name					
Position in Business (Officer or Shareholder					

Date

from Section 8)

Designated Operator Signature

(Individual who filled out section 10 for Lobster Permits)