

**National Marine Fisheries Service
2025 Lobster Trap Tag Order Form**



Do **NOT** use this form if the mailing address listed on your Federal lobster permit is in Connecticut, Massachusetts, New Hampshire, or Rhode Island; or if you possess a State of Maine lobster license; or if you possess a New York lobster license **and** you elected Area 6 only. If any of these conditions apply to you, **you must purchase your trap tags through your state agency.**

1. If you are not required to purchase trap tags through your state agency, and you have a valid 2025 Federal lobster trap permit, complete Parts **A**, **B**, and **C** of this form.

2. Send this completed form and payment to:

**Cambridge Security Seals
One Cambridge Plaza
Pomona, NY 10970**

You may also send completed forms authorizing credit card payment via fax (**845-290-0676**) or email to: traptag@cambridgeseals.com. Cambridge Seals can be contacted at **845-520-4111**.

Please note that it may take up to ten weeks to process your order.

3. Make a copy of this blank form for use when placing subsequent trap tag orders.

A

PLEASE PRINT

Name _____

P.O. Box /
Street _____

City/State/Zip _____

Telephone Number (____) _____

Vessel Name _____ Federal Permit # _____

Vessel Documentation # or State Registration # _____

B

PLEASE INDICATE BELOW THE NUMBER OF TRAP TAGS YOU WISH TO PURCHASE:

Note: The lobster management areas that appear on your trap tags will be consistent with those on your 2025 Federal lobster permit. The number of trap tags you may order may not exceed the trap allocation indicated on your 2025 Federal permit, plus an additional 10 percent.

Total Number of Federal Trap Tags Requested: _____ X \$0.20 per tag = \$ _____

Name on Credit Card: _____

Card Number: ____ / ____ / ____ / ____ Exp: ____ / ____

Security Code: _____ Billing Zip Code: _____

Please make cashier's checks or money orders payable to: Cambridge Security Seals.

No cash, personal, or corporate checks will be accepted.

If tax exempt, please complete and return a tax exemption form for your state of residence.

C

Signature _____

Date _____

I certify that the information provided on this form is true, complete and correct to the best of my knowledge, and made in good faith. Making a false statement on this form is punishable by law (18 U.S.C. 1001). Forms that are not signed and dated will not be processed.

The collection of this information is authorized under the Magnuson-Stevens Fishery Conservation and Management Act (16 U.S.C. 1801 et. seq.). The information will be used to manage the American lobster fishery. The purpose and use of the lobster trap tagging program is to provide identification of trap ownership and to limit the number of traps for those vessels that fish with traps by issuing lobster trap tags, with a maximum number of tags for each vessel. This assures consistency throughout the fleet of affected vessels. In addition, it allows us to determine the number of traps in use in the fishery to better monitor fishing effort in the future.

The public reporting burden for the collection of information is estimated at 5 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. The public burden for using this form to order additional trap tags is estimated at 2 minutes. Send your comments regarding this burden estimate, or any other aspect of this collection of information, including suggestions for reducing this burden, to Sarah Bland, Deputy Regional Administrator, Greater Atlantic Region, NMFS, 55 Great Republic Drive, Gloucester, MA 01930-2298.

In spite of any other provision of law, no one is required to respond to, or be subject to, the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid Office of Management and Budget Control Number.