Deep-Set Buoy Gear Exempted Fishing Permit Application Form

Please reference the instructions for specifics on filling out your application.

1) Application Date: _____

2) Applicant(s)*:
    a) Name: _____ Phone No: (_____)_____- _____
        Email: _____
        Address: _____
        Commercial Fishing Permits Held: _____

        Any history of current/pending state or federal violations in any commercial fishery? ☐ Yes   ☐ No
    b) Name: _____ Phone No: (_____)_____- _____
        Email: _____
        Address: _____
        Commercial Fishing Permits Held:_____

        Any history of current/pending state or federal violations in any commercial fishery? ☐ Yes   ☐ No

3) Number of vessels*: _____
    a) Vessel Name: _____ Registration Number: _____
        Name of Operator: _____
        Commercial Fishing Permits Held:_____

        Any history of current/pending state or federal violations in any commercial fishery? ☐ Yes   ☐ No
    b) Vessel Name: _____ Registration Number: _____
        Name of Operator: _____
        Commercial Fishing Permits Held: _____

        Any history of current/pending state or federal violations in any commercial fishery? ☐ Yes   ☐ No

4) Commercial Fishing Experience of EFP Participants*:
    a.1) DSBG - Years: _____ Type of participation: _____
    a.2) Other Swordfish gear – Type(s): _____
        Years: _____ Type of Participation: _____
    a.3) Other gear(s) – Type(s): _____
        Years: _____ Type of Participation: _____

    b.1) DSBG - Years: _____ Type of participation: _____
    b.2) Other Swordfish gear – Type(s): _____
        Years: _____ Type of Participation: _____
    b.3) Other gear(s) – Type(s): _____
        Years: _____ Type of Participation: _____

      *List information for additional EFP applicants/vessels/participants on a separate page.

5) Proposed EFP duration: _____

Justification: _____
_____
_____
_____

6) Intended DSBG Configuration: ☐ Standard (Attachment A)   ☐ Modified (please explain)
_____
_____

7) Target Species: _____☐ Swordfish only   ☐ Other (please list):
_____
_____

8) Fishing Area and Effort (indicate all that apply):

   a) ☐ Southern California Bight (Point Conception to the U.S.-Mexico Border):
      i) Vessels: _____
      ii) Estimate of fishing effort: _____
      iii) Additional details: _____
      _____
      _____

   b) ☐ Central California (Point Reyes to Point Conception):
      i) Vessels: _____
      ii) Estimate of fishing effort: _____
      iii) Additional details: _____
      _____
      _____

   c) ☐ Northern California (42° N. latitude to Point Reyes):
      i) Vessels: _____
      ii) Estimate of fishing effort: _____
      iii) Additional details: _____
      _____
      _____

   d) ☐ Oregon (Columbia River to 42° N. latitude):
      i) Vessels: _____
      ii) Estimate of fishing effort: _____
      iii) Additional details: _____
      _____

9) Data Gaps: Which of the following data gaps are addressed by your Exempted Fishing Permit application, and how will they be addressed? (See Attachment B) Check all that apply:

a) ☐ Bycatch & protected species interactions

How? _____
_____
_____
_____
_____

b) ☐ Active gear tending _____
How? _____
_____
_____
_____
_____
_____

c) ☐ Gear conflicts/number of vessels

How? _____
_____
_____
_____
_____
_____

d) ☐ DSBG time and area use

How? _____
_____
_____
_____
_____

e) ☐ Gear configuration

How? _____
_____
_____
_____
_____
_____

f) ☐ Concurrent gear use

How? _____
_____
_____

10) Reporting Requirements: Please answer questions identified in application instructions.

i will notify NMFS and CDFW by email 24 hours prior to departure and 24 hours prior to return of fishing trips fish tickets and landing reports will have a unique identifier in the not pad area, photocopys of fish tickets ,landing reportswill be sent to designated NMFS and CDFW contacts .a preliminary and final report will be presented annually including catch data,all my conclusions and data will gladly be made public,

11) Observer Coverage:

☑ I acknowledge that observer coverage may be required on up to 100% of my EFP fishing trips, and verify that I am willing and able to cover the cost of such coverage.

If you are unable to cover the entire cost of the observer coverage requirement, please explain what portion you may be able to cover and identify other sources of funding which may be available to help you cover observer costs.

i cannot cover 100%of EFP trips i am currently working on possible funding sources, i think 100% on the first 10 sets and then 30% after that like similar EFP holders at this time is a good way to go,also 100% video or electronic monitoring would be acceptable.

12) Applicant(s) Signature: _____

12-18-2016   Date