

**Deep-Set Buoy Gear Exempted Fishing Permit Application Form***Please reference the instructions for specifics on filling out your application.*1) Application Date: 07/13/2017 (RESUBMIT, PRELIMINARY APPROVAL)

## 2) Applicant(s)\*:

a) Name: Tetyana Sokolova Phone No: (213) 221-5530Email: mv\_2007@mail.ruAddress: 5414 NEWCASTLE AVE, APT#54 ENCINO, CA 91316Commercial Fishing Permits Held: LOBSTERAny 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 ☒ No3) Number of vessels\*: 1a) Vessel Name: VICTORIA Registration Number: CF6439 FFName of Operator: TETYANA SOKOLOVACommercial Fishing Permits Held: LOBSTERAny 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: 0 Type of participation: -a.2) Other Swordfish gear - Type(s): DRIFT NET SWORDFISH and SHARKYears: 5 Type of Participation: CAPTEN, CREWa.3) Other gear(s) - Type(s): LOBSTERYears: 3 Type of Participation: CRUW, CAPTEN

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: 5 YEARS  
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: 1 (VICTORIA)  
ii) Estimate of fishing effort: APPROXIMATELY 100 DAYS (depend on the wether)  
iii) Additional details: RIGHT NOW I CAN FISH ONLY IN SOUTH CALIFORNIA

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? DAY TIME FISHING BELOW THERMOCLINE, RELEASE NOT TARGETED CATCH, FOLLOW ALL COUNCIL'S REQUIREMENTS AND REGULATIONS

b) ☒ Active gear tending

How? 10 SETS WITH 3 HOOKS ON EACH SET BELOW THERMOCLINE WITH A RADAR REFLECTOR, FLOAT BOY AND STRIKE BOY FOLLOW ALL COUNCIL'S REQUIREMENTS AND REGULATIONS

c) ☒ Gear conflicts/number of vessels

How? RADIO COMMUNICATIONS, RADAR, AVOIDING AREA WITH ANOTHER BOATS, 1 VESSELS

d) ☒ DSBG time and area use

How? DAY TIME FISHING MORE THEN 3 MILES FROM COAST AND ISLANDS PLANNING TO FISH AT CHANNEL ISLANDS AND CATALINA ISLAND AREA

e) ☒ Gear configuration

How? FOLLOWING ATTACHMENT A

f) ☒ Concurrent gear use

How? ONLY DSBG, NO CONCURRENT GEAR WHEN FISHING DSBG



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

DETAILED RECORD KEEPING SUCH AS LOG BOOK  
OR DETAILED REPORT (VIA MAIL OR EMAIL)

MONTHLY INCLUDING CATCH AMOUNT, AREA, TIME, FISH SIZE,  
BYCATCH (IF ANY)

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.

12) Applicant(s) Signature:



07/13/2017

Date