

Deep-Set Buoy Gear Exempted Fishing Permit Application Form

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

1) Application Date: 7-14-17

2) Applicant(s)*:

- a) Name: RON ELLIS Phone No: (805) 450-4860
Email: _____
Address: 5609 W. CAMINO CIELO SANTA BARBARA, CA 93105
Commercial Fishing Permits Held: SO. CAL ROCK CRAB
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*: ONE

- a) Vessel Name: DEFIANCE Registration Number: 40335
Name of Operator: RON ELLIS
Commercial Fishing Permits Held: SO CAL ROCK CRAB
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: 0 Type of participation: _____
a.2) Other Swordfish gear - Type(s): 0
Years: _____ Type of Participation: _____
a.3) Other gear(s) - Type(s): BLACK COD LONGLINE, SEA BASS GILLNET
Years: 4 Type of Participation: SKIPPER, CREW
- 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: MAY - NOVEMBER 8 HOUR DAYLIGHT
Justification: AS WATER TEMPS AND FISH PRESENCE
ALLOWS

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

7) Target Species: SWAMP FISH swordfish only Other (please list):
OPAH, THRESHER, LOUVAR, TUNA

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

a) Southern California Bight (Point Conception to the U.S.-Mexico Border):

- i) Vessels: ONE / FV DEFIANCE
- ii) Estimate of fishing effort: 30-60 DAYS PER YEAR 90%
- iii) Additional details: CONCENTRATE EFFORT ON WATERS OFF
NORTHERN CHANNEL ISLANDS, SANTA ROSA FLATS,
RODRIGUEZ SEAMOUNT

b) Central California (Point Reyes to Point Conception):

- i) Vessels: ONE / FV DEFIANCE
- ii) Estimate of fishing effort: 5-10 DAYS PER YEAR APPROX 10%
- iii) Additional details: NORTHERN WATERS

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? MONITOR AND RECORD ALL BYCATCH AS REQUIRED.
RELEASE ALL NON-TARGET SPECIES

b) Active gear tending

How? KEEP IN VISUAL RANGE (BINOCULAR) AND
TEND TO ANY ACTIVE GEAR IMMEDIATELY

c) Gear conflicts/number of vessels

How? LITTLE CONFLICT ANTICIPATED IN PROPOSED
FISHING AREAS.

d) DSBG time and area use

How? 8 HOURS DAYLIGHT, NORTHERN CHANNEL
ISLANDS WATER

e) Gear configuration

How? STANDARD

f) Concurrent gear use

How? HOOK & LINE, TROLL GEAR ONLY IN
IMMEDIATE AREA

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

RECORD CATCH BY GEAR TYPE. RECORD AND
RELEASE BYCATCH, WHILE NOTING GEAR TYPE. ALL
CATCH TO BE LANDED ON FISH TICKET COMMERCIALY.

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:

Ren E...

7-14-17
Date