PACIFIC FISHERY MANAGEMENT COUNCIL Deep-Set Buoy Gear Exempted Fishing Permit Application Form

Please refer to the instructions for specifics on filling out your application.

1) Application Date: 2/3/2018

2) Applicant(s)*:

a)	Name: Greg Surgener Phone No: (661)599 - 3748
	Email: gregsurgener e gmail. com
	Address: 1324 Ensley Dr., Bakersfield, CA 93312
	Commercial Fishing Permits Held:

Commercial Fishing Experience:

	Years of experience	Gear type / Type of participation (captain, crew, vessel owner, etc.)
DSBG	3	Drift Gill Net / crew
Other swordfish gear	3	Harpoon / crew
Other gear type(s)	25	Rod & reel / coptain, crew

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b) Name:

_____ Phone No: (____) _____

Email:

Address:

Commercial Fishing Permits Held:

Commercial Fishing Experience:

	Years of Experience	Gear type / Type of participation (captain, crew, vessel owner, etc.)
DSBG		
Other swordfish gear		
Other gear type(s)		

DSBG EFP Application

a) Vessel Name: <u>Lila Ryan</u>	Registration Number: 1146190
Name of Operator: Greg Surge	nar In seas, Pacific Highly Migratory
b) Vessel Name:	Registration Number:
Name of Operator:	
Commercial Fishing Permits Held:	

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

4) Do any of the applicants/vessel operators have current/pending state or federal violations in any commercial fishery? \Box Yes \bigotimes No (If yes, follow-up on the nature and status of any violations may be required as part of the application review process.)

5) Duration: The EFP will normally be issued for a two-year period from the date of issuance. If you have good reason for receiving an EFP for a longer period, specify the requested number of years and provide justification for the longer duration:

Two years is Fine, but I'd likely renew. 6) Intended DSBG Configuration (see Attachment A): 🕅 Standard 🛛 🗆 Linked

Describe proposed gear modifications (if any) that differ from the descriptions in Attachment A:

Standard only.

DSBG EFP Application

7) Do you intend to target any species other than swordfish? \Box Yes \bowtie No

(This does not include other species that may caught incidentally when targeting swordfish.) If you do plan to use the gear to catch other species, list the species and how the fishing method you plan to use would differ (depth, time of day, season, etc.):

8) Fishing Area and Effort:

Area	Number of vessels / Vessel names	Estimated fishing effort in number of days or sets
Southern California Bight (Pt. Conception to the U.S Mex. Border)	1/Lilapyan	50-100 days
Central California (Point Reyes to Point Conception)	1/LilaRyon	50-100 days
Northern California (42° N. latitude to Point Reyes)	1/Lila Ryan	50-100 days
Oregon (Columbia River to 42° N. latitude)	1/LilaRyan	50-100 days

Please note that the Council is prioritizing applications to fish outside Southern California Bight.

I would like to Fish in WA should it

Additional information you think would be helpful in reviewing the application concerning where you plan to fish and the amount of fishing:

become available.

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9) Data Gaps: Will your EFP fishing specifically address any of the following data gaps? (See Attachment B for descriptions)

X Active gear tending

Gear conflicts/number of vessels

X Gear configuration

Concurrent gear use

Explain what methods you would use, or information you plan to gather, to address the data gaps you checked off above:

I will be tending the gear actively and recording times and gear times. I will be actively taking notes on gear Mishaps, number of vessels around and other issues that might arise. I'll use the standard gear configurations Willing to make slight changes if needed for your I will harpoon swordfish when that optionis available.

10) Reporting Requirements and Observer Coverage:

- You must maintain a logbook for reporting catch and other operational information (such as time and location of catch) in a format specified by National Marine Fisheries Service
- Up to 100% observer coverage may be required on your EFP fishing trips
- Data gathered as part of the EFP will be publicly available

I acknowledge the above conditions, and verify that I am willing and able to cover the cost of any level of observer coverage required under permit terms and conditions.

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 am willing to work with the National Marine, Fisheries Service and the NOAA Observer program as needed. References: Jonathan Gonzalez (805) 455-7220 Josh Dagama (805) 400 - 7564 11) Applicant(s) Signature: