

Australian Fisheries Management Authority ABN: 81 098 497 517

Application for High Seas Fishing Permit

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HS1

Name Is this name a: (C)ompany* (P)artnership or (I)ndividual's Name? Name?	
State Post Code ACN/ABN Number	
Street Address (If same as postal, write "As above")	
State Post Code Country (If not Australia)	
Phones Business Mobile Fax	
Main Contact Person Title First Name Middle Initial Surname	

2 Boat D	Details - Attach a port side pho	tograph of the b	oat
Name of Boat		Main Engine Rating (KW)	
International Radio Callsign		Hull Material	
Length (LOA)		Home Port	
Tonnage		Place Where Built	
Breadth		Is the Boat Fitted with VMS	YES / NO
Name of Owner		If YES Immarsat Mobile No.	
Signature of Owner			

3	Propose	d Type Of Operation		
The boat nominated in section 2 above will be used for the purpose of:				
	Fishing	Includes the taking, carrying and processing of your own catch only.		
	Other	Please describe		

4	Proposed Target Species		
List prin	nary species to be (tick appropriate box) caught	carried	processed during the proposed fishing operations.

5 **Proposed Area of Operation**

In the space provided below, specify which maps you are applying for on your proposed operations.

In the space provided below, specify which zones you are applying for on your proposed operations.

L			

6 Proposed Fishing Gear

Include details of proposed fishing gear to be used for operations in the area specified in section 5.

GEAR - Includes set lines, drop lines, trot lines, jigging machines, fish and crustacean traps etc. EXCLUDING NETS.

NOTE: IN the case of longline and similar devices the average number of hooks and length of line should be specifed. With traps, etc, dimensions of gear should be included.

Description

Number

www.afma.gov.au

6 Proposed Fishing Gear (continued)

NETS - Include Fish Trawl, Prawn Trawl, Danish Seine, Mesh Net, Gill Net, etc. Dimensions of gear should be provided, e.g. headrope length, mesh size, total length, depth etc, as appropriate (diagram may be used.

Description

7 Commonwealth Concession Details In the space provided, specify the Commonwealth Concession numbers held in the name described in Section 1. e.g. SFR999, 29999SESS

8 Proposed	Master			
The following person is nominated as the Master of the boat described in section 2.				
Name				
Postal Address				
	Post Code			
Contact Numbers	()			

9 Extra Information

If the species listed in Q4. is a shared stock with a domestic fishery, please provide a description of proposed area of operation. e.g. specific co-ordinates

Description

10 Declaration

I, the applicant detailed in Part 1, make application in accordance with s32(1) of the Fisheries Management Act 1991 (the Act) if the permit is capable of being renewed, at the end of each period of application of that permit, for AFMA to re-grant it to me and to continue its registration under s57H of the Act, as required from time to time.

I further declare that the information provided on this form is, to the best of my knowledge, true and correct and I undertake to update that information as may be necessary.

Signature(s) and Date			Affix
Printed Name(s) and Position Held in Company]	Company Seal

NOTE: Applications made by partnerships are to be signed and dated by all partners. If signing on behalf of a company: (1) Two Directors, or (2) Director and Secretary, or (3) Sole Director must sign and state their position held under the signature.

WARNING

It is an offence, under the *Fisheries Management Act 1991*, for a person(s) to make a statement or furnish information in an application that is, to the knowledge of that person(s), false or misleading in any particular. This may lead to suspension of the fishing permit and/or 12 months imprisonment.

Application Fee

Fees may apply for this service. Please refer to the schedule of fee listed on the AFMA website: www.afma.gov.au or contact AFMA licensing on 1300 723 621

Return Application To:

- 1. Australian Fisheries Management Authority PO Box 7051, Canberra BC, ACT 2610, or
- 2. Fax: 02 6225 5440, or
- 3. Email: licensing@afma.gov.au