



## WCFPC AREA ENDORSEMENT APPLICATION

(Please print legibly or type)

<b>SECTION 1. VESSEL INFORMATION</b>		
USCG DOC. OR STATE REG. NO	VESSEL NAME	TOTAL FISH HOLD CAPACITY  _____ cubic meters or _____ short tons
RADIO CALL SIGN (Indicate whether an International Radio Call Sign has been assigned to the vessel, and if yes, specify the call sign.)  <div style="text-align: center;"> <input type="checkbox"/> No                      <input type="checkbox"/> Yes: _____         </div>		
REFRIGERATION/FREEZER TYPE AND CAPACITY (Check and provide numbers for all that apply. See instructions for details.)		
<input type="checkbox"/> ICE	No. ice-making units: _____	Ice-making capacity: _____ tons/24hr
<input type="checkbox"/> BRINE	No. chiller units: _____	Nominal size of each unit: _____ tons
<input type="checkbox"/> RSW	No. chiller units: _____	Nominal size of each unit: _____ tons
<input type="checkbox"/> BLAST	No. freezer units: _____	Nominal size of each unit: _____ tons
<input type="checkbox"/> PLATE	No. freezer units: _____	Fish-freezing capacity: _____ tons/24hr
<input type="checkbox"/> TUNNEL	No. freezer units: _____	Fish-freezing capacity: _____ tons/24hr
<input type="checkbox"/> OTHER: _____	No. units: _____	Fish-freezing capacity: _____ tons/24hr
<b>SECTION 2. FISHING METHODS</b> (Check each fishing gear type used or intended to be used on the vessel. Check as many boxes as apply. Check at least one box unless the vessel is a carrier, bunker, or other support vessel and is not used to harvest fish. Your responses under this section are for informational purposes only; they will not be used to place conditions on the WCFPC Area Endorsement, if issued.)		
<input type="checkbox"/> Purse Seines	<input type="checkbox"/> Vertical Lines – Hand-operated (non-squid)	<input type="checkbox"/> Trolling lines
<input type="checkbox"/> Driftnets	<input type="checkbox"/> Vertical Lines – Mechanized (non-squid)	<input type="checkbox"/> Poles and lines
<input type="checkbox"/> Drifting Longlines	<input type="checkbox"/> Vertical Lines – Squid Jigs	<input type="checkbox"/> Harpoons
<input type="checkbox"/> Other type(s) of gears (specify): _____		



**SECTION 3. VESSEL COMMUNICATION TYPES AND NUMBERS** (For each communication type listed, check the "yes" or "no" box to indicate whether the communication type is available on the vessel. If yes, provide the number/address, and check or write in the Inmarsat service.)

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	Voice Inmarsat mobile number: _____
		Inmarsat service: <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> M <input type="checkbox"/> Mini-M <input type="checkbox"/> F Other: _____
<input type="checkbox"/>	<input type="checkbox"/>	Fax Inmarsat mobile number: _____
		Inmarsat service: <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> M <input type="checkbox"/> Mini-M <input type="checkbox"/> F Other: _____
<input type="checkbox"/>	<input type="checkbox"/>	Email Inmarsat address: _____
		Inmarsat service: <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> M <input type="checkbox"/> Mini-M <input type="checkbox"/> F Other: _____
<input type="checkbox"/>	<input type="checkbox"/>	Telex Inmarsat mobile number: _____
		Inmarsat service: <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> M <input type="checkbox"/> Mini-M <input type="checkbox"/> F Other: _____
<input type="checkbox"/>	<input type="checkbox"/>	Satellite telephone number (other than Inmarsat): _____
<input type="checkbox"/>	<input type="checkbox"/>	Single sideband radio

**SECTION 4. VESSEL OPERATOR INFORMATION**

(Provide the name(s) and citizenship of vessel operator(s) (i.e., the master on board the vessel.)

Last name	First name	Middle name	Suffix	Country of citizenship
1.				
2.				
3.				
4.				

**SECTION 5. COLOR PHOTOGRAPH OF VESSEL** (Provide a photograph of the vessel in its current form and appearance. Indicate whether an electronic or paper photograph is being provided or indicate that a photograph has already been provided. If an electronic or paper photograph is being provided, enter the date the photograph was taken. If the vessel's form or appearance materially changes (including, but not limited to, the vessel is painted another color, the vessel is renamed, or the vessel undergoes a structural modification) or if the photograph becomes more than five years old, you must submit to NMFS a new photograph of the vessel within 15 days of the change or of the photograph becoming five years old).

<input type="checkbox"/> Electronic photograph <input type="checkbox"/> Paper photograph Date photograph taken: _____ (mm/dd/yyyy)	<input type="checkbox"/> Photograph already provided with application for high seas fishing permit
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**SECTION 6. SIGNATURE** (All applications must be signed and dated)

By signing this application, the undersigned owner or operator of the vessel identified above declares under penalty of law that all information in this application is true, accurate, and complete. A non-refundable application fee of \$69.00 in the form of a check or money order made payable to "U.S. Department of Commerce – NOAA" must accompany each application.

Signature

Name (Print legibly or type)

Date (mm/dd/yyyy)

Submission of this application information is mandatory. The information will be used for determining eligibility for a WCPFC Area Endorsement as well as for recordkeeping and reporting under the Western and Central Pacific Fisheries Convention Implementation Act, the High Seas Fishing Compliance Act, the South Pacific Tuna Act, and other applicable law. The public reporting burden for this collection of information is estimated to average 60 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining data needed, and completing and reviewing the information. Send comments regarding this burden estimate or suggestions for reducing this burden to: Regional Administrator, NMFS Pacific Islands Regional Office, 1601 Kapiolani Blvd., Suite 1110, Honolulu, HI 96814. Notwithstanding any other provision of law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.



## **INSTRUCTIONS FOR WCPFC AREA ENDORSEMENT APPLICATION**

Any fishing vessel of the United States used for commercial fishing for highly migratory species on the high seas in the Western and Central Pacific Fisheries Convention Area must have on board a valid high seas fishing permit that has a valid WCPFC Area Endorsement. Note that "fishing" includes receiving fish in the course of a transshipment or supporting fish-harvesting vessels, such as by bunkering or providing supplies.

For the definition of "high seas", see the regulations at 50 CFR Part 300 Subpart B. For the definitions of "commercial", "fishing", "highly migratory species", Western and Central Pacific Fisheries "Convention Area", "high seas fishing permit", and "WCPFC Area Endorsement", see the regulations at 50 CFR Part 300 Subpart O.

The owner or operator of a U.S. fishing vessel may apply for a WCPFC Area Endorsement by completing this application form, providing the required vessel photograph, and paying the required application fee.

In order to obtain a WCPFC Area Endorsement, a high seas fishing permit for the vessel must have already been issued or applied for in accordance with 50 CFR Part 300 Subpart B. You may obtain an application form and instructions for a high seas fishing permit by contacting any National Marine Fisheries Service (NMFS) Regional Administrator or by visiting the website at <http://www.nmfs.noaa.gov/ia/services/highseas.htm>

**If there are any changes to the information provided after this form has been submitted, you must inform NMFS in writing of the changes within 15 days of the changes. This may be done by submitting to NMFS another copy of this form that indicates the updated information.**

**If there are any material changes to the form or appearance of the vessel after this form has been submitted, such as being painted another color, being renamed, or undergoing a structural modification, you must inform NMFS and submit a new photograph of the vessel within 15 days of the changes.**

### **SECTION 1. VESSEL INFORMATION**

Enter the U.S. Coast Guard Official Documentation Number assigned to the vessel. If the vessel is not USCG-documented, enter the vessel's current state or tribal registration number.

Enter the current name of the vessel.

Enter the vessel's total fish hold capacity, in either cubic meters or short tons.

Indicate whether or not an International Radio Call Sign (IRCS) has been assigned to the vessel (by the Federal Communications Commission), and if so, write in the IRCS.

Indicate all the refrigeration/freezer type(s) on board the vessel that are used for the catch (ignore freezers and refrigerators used only for bait and other non-catch items). For each type used, enter the number of units on board and their capacity, as follows:

If the vessel uses an *ice* system (including ice slurry), indicate the number of ice-making units on board and the total ice-making capacity, expressed as the number of short tons of ice that can



be produced per 24-hour period. If the vessel uses ice produced shoreside and does not have an ice-maker on board, the "ice" box should be checked and "0" should be entered for number of ice-making units and ice-making capacity.

If the vessel uses a *brine* system, indicate the number of chiller units on board and the nominal size of each chiller unit, expressed in short tons.

If the vessel uses an *RSW* (refrigerated seawater) system, indicate the number of chiller units on board and the nominal size of each chiller unit, expressed in short tons. If seawater is cooled with ice to make an ice slurry, check the "ice" box, not the "RSW" box.

If the vessel uses a *blast* freezer system, indicate the number of freezer units on board and the nominal size of each chiller unit, expressed in short tons.

If the vessel uses a *plate* freezer system, indicate the number of freezer units on board and the total fish-freezing capacity of the system, expressed as the number of short tons of fish that can be frozen per 24-hour period.

If the vessel uses a *tunnel* freezer system, indicate the number of freezer units on board and the total fish-freezing capacity of the system, expressed as the number of short tons of fish that can be frozen per 24-hour period.

If the vessel uses a refrigeration/freezer type not listed above, indicate the refrigeration/freezer type, the number of units on board, and the total fish-freezing capacity of the system, expressed as the number of short tons of fish that can be chilled or frozen per 24-hour period.

## **SECTION 2. FISHING METHODS**

Check the boxes for all the fishing gears used or intended to be used. Check at least one box unless the vessel is a carrier, bunker, or other support vessel and it is not used to harvest fish. If the fishing gear(s) is not included in the list provided, check the box for "Other type(s) of gears" and describe the fishing gear(s). Your responses are for informational purposes only; they will not be used to place conditions on the WCFPC Area Endorsement, if issued.

## **SECTION 3. VESSEL COMMUNICATION TYPES AND NUMBERS**

For each communication type listed, check the "yes" or "no" box to indicate whether the communication type is available on the vessel. For each available communication type except "single sideband radio", enter the mobile number, email address, or satellite telephone number, as appropriate. For each available communication type other than "satellite telephone number (other than Inmarsat)" and "single sideband radio", circle the Inmarsat service used (B, C, M, Mini-M, F, or other), and in the case of "other", specify the service.

## **SECTION 4. VESSEL OPERATOR INFORMATION**

Enter the full name and country of citizenship of the vessel operator or operators. "Operator" means the master or other individual aboard and in charge of the vessel. If it is anticipated that the vessel will be operated by more than one individual during the period of validity of the WCPFC Area Endorsement, as many as four individuals may be listed.



## **SECTION 5. COLOR PHOTOGRAPH OF VESSEL**

This application must be accompanied by a full-color photograph of the vessel in its current form and appearance, in either electronic or paper format. If a photograph has already been provided to NMFS as part of an application for a high seas fishing permit, an additional photograph does not have to be submitted with this application, provided that the photograph meets the specifications described below. If the appearance of the vessel materially changes after this form and the photograph have been submitted (including, but not limited to, the vessel is painted another color, the vessel is renamed, or the vessel undergoes a structural modification) or if the photograph becomes more than five years old, you must inform NMFS and submit a new photograph of the vessel within 15 days of the change or of the photograph becoming five years old.

The photograph must meet the following specifications:

The photograph must show a bow-to-stern side-view of the vessel, clearly and legibly displaying the vessel name and markings, and such markings must be in accordance with the vessel identification requirements of 50 CFR Part 300 Subpart O.

The photograph must have been taken within the last five years.

Paper photographs must be at least 5 by 7 inches and no greater than 8½ by 11 inches in size.

Electronic photographs must: (1) be in either jpg or tiff file formats; (2) have a resolution of at least 300 pixels per inch at a size of 5 by 7 inches; and (3) be of a file size no greater than 2 megabytes (MB).

Paper photographs may be submitted together with this form, or if the form is being submitted online or by other electronic means, paper photographs may be sent to: NMFS Pacific Islands Regional Office; International Fisheries Program; 1601 Kapiolani Blvd., Suite 1110; Honolulu, HI 96814. In that case, write clearly on the back of the photograph or a separate piece of paper the following information: "WCPFC Area Endorsement", name of applicant (for WCPFC Area Endorsement), name of vessel, vessel's documentation or registration number, and date photograph was taken (mm/dd/yyyy).

Electronic photographs may be sent via email to [PIR.WCPFC@noaa.gov](mailto:PIR.WCPFC@noaa.gov). Identify the message subject as: "Vessel photograph for WCPFC Area Endorsement" and include in the message body the following information: name of the applicant (for WCPFC Area Endorsement), name of vessel, vessel's documentation or registration number, and date photograph was taken (mm/dd/yyyy).

## **SECTION 6. SIGNATURE**

Sign and print your name and enter the date the application was signed. Be sure to include your application fee of \$69.00 in the form of a check or money order made payable to the "U.S. Department of Commerce – NOAA."