

FORM 7  
KINGDOM OF TONGA



The Fisheries Management Act 2002  
APPLICATION TO RENEW A HIGH SEAS FISHING VESSEL PERMIT

<b>Name of Vessel</b> .....	<b>International Radio Call Sign:</b> .....
<b>Flag State Registration Number:</b> .....	<b>Fishing Vessel Registration Number:</b> .....
<b>Number of last licence/Permit held:</b> .....	
<b>Vessel Owner</b>	<b>Vessel Charterer / Operator</b>
Name: .....	Name: .....
Address: ..... ..... .....	Address: ..... ..... .....
<b>Vessel Master/Captain</b>	<b>Fishing Master</b>
Name: .....	Name:.....
Address: ..... .....	Address:..... ..... .....

*I hereby apply to renew a high seas fishing vessel permit described above. I declare that the above information is true and complete. I understand I am required to notify the Secretary immediately of any material changes to the above information and that failure to do so may render me liable to prosecution.*

**Applicant**

Name of Applicant:  
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Tel No:  
.....

Address:  
.....

Fax No:  
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.....

Telex No:  
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Signature:  
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Date: .....

*This application is to be forwarded to the Secretary, Ministry of Fisheries at the address shown below and is to be accompanied by the prescribed fee.*

The Secretary Ministry of Fisheries P.O. Box 871 Nuku'alofa, Kingdom of Tonga	Telephone: (676) 21399 Telex: 66369 PRIMO TS Fax: (676) 23891
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