

FORM 1

KINGDOM OF TONGA



THE FISHERIES MANAGEMENT ACT 2002

**APPLICATION FOR REGISTRATION OF A LOCAL FISHING
VESSEL**

(Fisheries (Local fishing) Regulations 2009 - Regulation 3)

INSTRUCTIONS: Underline surname or family name
Address means complete mailing address
Clearly mark the boxes **X** where appropriate
Attach a separate sheet where necessary

A. DETAILS OF VESSEL

Name of Vessel:

Make and type of vessel:

Size of vessel: GRT LOA Radio call sign (if any) :

Hull material: Wood Where built:

GRP Year built:

Engine Steel Radio (HF/VHF/SSB/No):

Other Radar (yes/No):

Inboard: HP Type and make:

Outboard: HP Make:

B. DETAILS OF FISHING CAPACITY *(Complete as appropriate)*

(a) Drop line (deep bottom fishing) Number of reels

(b) Trolling Number of lines:

(c) Long-lining

(d) Gillnetting

(e) Other fishing methods (specify)

For (c), (d) and (e) attach details on a separate sheet, with a sketch of the gear to be employed.

Does the vessel have fish storage capacity below deck?

Yes

No

If yes:

Chilled capacity

kg

Blast freezer capacity

kg

Freezer holds capacity

kg

Ice machine production

kg

If no:

How much fish can be carried on deck in insulated boxes?

kg

C. DETAILS OF OWNERSHIP

Name of owner (if owner is a registered company, give name and address and company registration number)

Address

Fax

Telephone

Name of charterer (if applicable)

Address

Fax

Telephone

Name of master

D. DECLARATION BY APPLICANT

1. I hereby apply to register the vessel described above as a local fishing vessel. I declare that the information supplied in this application is true, correct and complete. I understand that I am required to report immediately to the Secretary any changes to the information given on this form and further understand that failure to do so may render me liable to prosecution.

2. I declare that the vessel described above is wholly owned by (mark 'x' beside a, b, or c)

a. the Government of Tonga or by any statutory body established under any law of Tonga;

b. one or more natural persons who are Tongan subjects;

c. any company, society or other association or person incorporated or established under the laws of Tonga.

**Signature of Applicant(s) or authorised
company representative**

Date

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

The Secretary
Fisheries Department
Ministry of Agriculture Food
Forestry and Fisheries
P.O.Box 871
Nuku'alofa
Kingdom of Tonga

Telephone: (676) 21399
Telex : 66369 PRIMO TS
Fax: (676) 23891