

FORM 3
KINGDOM OF TONGA



The Fisheries Management Act 2002
APPLICATION FOR A FOREIGN FISHING VESSEL LICENSE

- INSTRUCTIONS:**
- * Underline surname or family name
 - * Address means complete mailing address
 - * Clearly mark the boxes X where appropriate
 - * All units Metric; Please specify if other units used
 - * Affix a recent 6 x 8 inch colour side photo of the vessel to this application

Name of Vessel	Previous name (s) of vessel:
International Radio Call Sign: (note only a local fishing vessel or a Tongan ship, which are the only vessels entitled to fly a Tongan flag, can be issued with a high seas fishing vessel permit by Tonga as the flag State; hence, this deletion. See section 49(3) of the Act)	Previous flag (s):
Flag State Registration Number: (this is the number of the vessel under the registration requirements of the Shipping Act - do you want any reference to the Shipping Act here, rather than stating the 'flag State'?)	Previous flag (s) Registration Number:
Fishing Vessel Registration Number: <i>If this vessel was licensed in Tonga before, please specify:</i>	
Number of last licence/Permit held:	
Vessel Owner	Vessel Charterer / Operator
Name:	Name:
Address:	Address:

.....
.....
.....
.....

Vessel Master/Captain

Fishing Master

Name:
.....

Name:.....
.....

Address:
.....
.....

Address:.....
.....
.....

Vessel Agent

Phone No.:

Name:

Address:
.....

Vessel Type:

Single Purse
Seiner

Longliner

Bunker

Group Purse
Seiner

Pole and Line

Fish Carrier / Reefer

Mothership

Trap Boat

Other (Please specify)

Net Boat

Troller

Hull Material:

Steel

Fibreglass

Other (Please specify)

Wood

Aluminium

Gross Tonnage (metric
tons)

Length Overall
.....(metres)

Country Built
.....

Rated Speed(knots)

Year Built

Number of Crew

Total Engine Power(specify
units)

Beam

Total Fuel Carrying Capacity:
.....(kilolitres)

Navigation/Position Fixing equipment:

Moulded Depth:
.....

.....
.....

WARNING: It is an offence, punishable by a fine, to make a false, incomplete or misleading statement. A Permit will not be issued, or a Permit issued on the basis of this application is liable to cancellation, if any of the information given is false, incomplete or misleading.

1 Is the owner or charterer the subject of proceedings under the bankruptcy laws of any jurisdiction? If "yes", please give details. (attach a separate sheet if necessary) **Yes** **No**

2 Has the vessel ever been used in an offence against the Fisheries Management Act 2002? **Yes** **No**
If "yes", please give details. (attach a separate sheet if necessary)

3 If the vessel has previously held a high seas fishing permit or equivalent authorisation by a participating state or a party to the Compliance Agreement, has such permit or authorisation been suspended or revoked during the 3 years immediately preceding the date of this application? If "yes", please give details. (attach a separate sheet if necessary) **Yes** **No**

4 Does the vessel hold current fishing licences, permits or authorisations elsewhere in the region? If "yes" please specify the licensing/ permitting or authorising country(y) (ies) and licence/ permits/ authorisation number(s). **Yes** **No**

5 Provide details of any joint ventures or other contractual arrangements with the Government of Tonga or any person in connection with the proposed fishing operations.

I hereby apply for a foreign fishing vessel license 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

State whether owner, charterer :

Name of Applicant: Tel No:

Address: Fax No:

..... Telex No:

.....
.....

Signature:
.....

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