



APPLICATION

Recreational Blue Fin Tuna Authorisation

Applicant's Details:

Name and Surname: _____

ID No.: _____

Address: _____

Town: _____ Tel/mob: _____ Email: _____

Vessel Registration (No / Valletta): _____ Vessel Name: _____

Vessel Home Port: _____

PLEASE ATTACH A COPY OF YOUR VESSEL LICENCE WITH THIS APPLICATION.

CONDITIONS:

- 1 *The Department of Fisheries and Aquaculture reserves the right to amend any condition related to the authorisation being applied for.*
- 2 *The Authorisation holders must comply with all instructions issued by the Department of Fisheries and Aquaculture.*
- 3 *Records of any catches must be reported to the Department of Fisheries and Aquaculture.*
- 4 *No fishing within the fish farm boundaries is permitted.*
- 5 *Fishing must be carried out in accordance to ICCAT recommendations as well as to relevant EU and local Legislation.*

Applicant's signature: _____

Date: _____

Office use

Received: _____ (date)

Permit No: _____

Receiving officer: _____

Approved: _____ (date)

Approved by: _____