

COMMERCIAL FISHERIES RESEARCH FOUNDATION P.O. Box 278, Saunderstown, RI 02874 Phone: (401) 515-4892 | Fax: (401) 515-3537 www.cfrfoundation.org

CFRF Black Sea Bass Research Fleet: Vessel Application

(All information will be kept confidential)

| Applicant Information: |
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| Name (F/V Owner & F/V Captain): |
| Company Name (If Applicable): |
| Residential Address: |
| |
| Mailing Address (if different than Residential Address): |
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| |
| Email Address: |
| Home Phone Number: |
| Cell Phone Number: |
| |
| Vessel Information: |
| Vessel Name: |
| Gear Type: |
| Target Species: |
| Home Port: |
| Number of Crew: |
| Vessel Length: |
| Vessel Horsepower: |
| Areas Most Often Fished: |
| Months Typically Fished (e.g. April through December) |
| Months When Black Sea Bass is caught (including as bycatch): |
| Number of Days Fished Per Year: |

| Years of Commercial Fishing Experience: |
|---|
| Permits & Licenses: |
| Federal Permit Number: |
| State Permit Number: |
| Fishing Vessel RI Registration #: |
| US Coast Guard Sticker #: |
| Other Permits: |
| Past Involvement in Cooperative Research and/or Data Collection: |
| I verify that: 1) The information listed above is accurate 2) I have read the description of the program and required work tasks, and if chosen to be a member of the research fleet, agree to: 1) Carry out the work tasks identified in the sampling program, 2) Participate in organization/training/review meetings as required, and 3) Be committed to assisting with achieving the goals of the pilot program |
| Printed Name: |
| Signature: |
| Date: |
| Applications can be submitted by: |
| 1) Email: <u>theimann@cfrfoundation.org</u> 2) Mail: Commercial Fisheries Research Foundation P.O. Box 278 Saunderstown, Rhode Island 02874 3) Fax: (401) 515-3537 |
| 5/ 1 av. (+01/ 515-5557 |

For further information please see: <u>http://www.cfrfoundation.org/black-sea-bass-fleet/</u>.

Questions? Please contact Thomas Heimann at (401)-515-4892 or <u>theimann@cfrfoundation.org</u>