



REPUBLIC OF LIBERIA
NATIONAL FISHERIES AND AQUACULTURE AUTHORITY

P.O. BOX 1384
1000 MONROVIA, 10 LIBERIA



SCHEDULE 2

Section 20(1)

LICENSE APPLICATION FORM

1. Full name of the fishing vessel
2. Previous names of the fishing vessel, if known
3. Registration number
4. Port of registry
5. Has the vessel identified above flown the flag of another State or States within the last three years?
YES_____. NO_____ If yes, provide the following information for each period during which the vessel operated under such other flag or flags.
 - a. Period: Beginning mm-dd-yyyy; End mm-dd-yyyy
 - b. Vessel Name
 - c. Flag
 - d. International Radio Call Sign
 - e. Homeport
 - f. Owner Name, Address, Phone, Fax
 - g. Operator Name, Address, Phone, Fax (If necessary provide additional information on a separate sheet of paper)
6. International radio call sign
7. Vessel communication types and numbers (Inmarsat A, B and C numbers and satellite telephone number, fax)
8. Identifying code letters and/or numbers used for identification during radio transmission
9. Type of Vessel Monitoring System installed. (Model and serial numbers)
10. Navigation and position fixing aids

11. Name and address of the owner(s) of the vessel

a. Name and mailing address of owner, date and place of birth, phone, fax

b. if company is owner, name and registered address of company, date and place of incorporation, phone fax

12. Full name, address and nationality of each person who is an operator of the vessel, state whether owner, charterer, master or other (if other, please state details)

13. Normal crew complement

14. Vessel type

15. Vessel specifications

a. material of construction

b. date and location of build

c. length (Please indicate type: LOA, length between perpendiculars, registered length, etc.)

d. gross registered tonnage

e. power of main engine or engines

f. hold capacity

g. moulded depth and beam

h. carrying capacity

i. freezer type, capacity and number

ii. fish hold capacity

16. Fishing gear description

a. types (as defined by the International Standard Statistical Classification of Fishing Gears)

b. gear specifications

c. quantity

17. Authorization or license granted by the flag State

a. Form and number

b. Period of validity

c. Specific area(s), species and time periods for which it is valid

18. Full name and address of insurer

19. Registration number and make of helicopter, if any, to be carried on the vessel

20. Registration number, make and name and address of any operator of any aircraft to be used in association with fishing activities

21. State whether the owner or charterer is insolvent or in any bankruptcy proceeding under the laws of any State

22. State whether the owner, operator or vessel has been involved in a violation of any law of the Republic of Liberia

23. Has the vessel identified above, under its current name/flag, or any previous names/flags, had any permit or license suspended or revoked within the past three years? YES_____ NO_____

If yes, list and attach on a separate sheet of paper the circumstances surrounding each such instance and include an explanation of the current status of the suspension or revocation.

24. Attach a photograph of the vessel showing all required markings

25. Submit a copy of vessel registration documents from the Flag State

26. Submit a copy of the business registration license with proof of address in country of business registry;

27. Is the vessel currently licensed to fish in other countries other than the Flag State

YES NO

If yes submit copies of all licenses currently held by the vessel

28. Submit a copy of documents detailing the VMS code

29. Does the vessel carry authorization to fish in Liberia waters from the Flag State (YES /NO)

If yes submit a copy of the authorization document

30. Please sign the following statement in regards to the submitted license application

I hereby confirm that all information given, furnished, maintained or required to be given, in the process of license application for the vessel is true, complete and accurate and no such information shall be false, misleading or inaccurate.

Name:

Company:

Position:

Signature:

Date: