



Commercial Fisheries Entry Commission 2019 Special Harvest Area Permit Application

PO Box 110302
Juneau, AK 99811-0302
Phone: 907-789-6150
Toll-Free: 1-855-789-6150
Fax: 907-789-6170
www.cfec.state.ak.us

Please use this form to apply for a 2019 Special Harvest Area (Hatchery) permit. Complete the agent designation on page two, make three copies and send the original to the Commercial Fisheries Entry Commission (CFEC). Please keep one copy for the hatchery's records and provide one copy to the named agent.

The agent must have the agent designation form in their possession at all times while operating gear under the terms of the permit. The agent must also hold a valid crew member license, an interim-use or limited entry permit and have valid photo ID.

A permit fee of \$75.00 for each hatchery is required. Payment may be submitted by check, money order or the attached credit card authorization. Additionally, you may submit your application form by fax or email to dfg.cfec.licensing@alaska.gov.

Permit Number: _____

Hatchery Information:

Hatchery Name: _____

Permanent Mailing Address: _____

City: _____ State: _____ Zip: _____ Agent or Contact Person: _____

Phone Number: _____ Check if Unlisted Email Address: _____

Hatchery Location: _____

Areas to be Fished: _____

Fishery Resources to be Harvested: _____

Types of Gear: _____ ADFG Number(s) Being Fished: _____

PNP Hatchery Permit Number: _____ Number of Cards: _____

Temporary Mailing Address (for these permits): _____

City: _____ State: _____ Zip: _____

Certification:

I certify that all of the information contained herein is true and complete and that all requirements of AS 16.43.400-440 and 20 AAC 05.571-572 have been met.

Signature of Agent

Title

Date



**Commercial Fisheries Entry Commission
2019 Special Harvest Area Permit
Agent Designation Form**

PO Box 110302
Juneau, AK 99811-0302
Phone: 907-789-6150
Toll-Free: 1-855-789-6150
Fax: 907-789-6170
www.cfec.state.ak.us

Name of Institution: _____

Name of Agent: _____

Mailing address of Agent: _____

Height	Weight	Eye Color	Hair Color	Date of Birth
--------	--------	-----------	------------	---------------

Is authorized to use the *Special Harvest Area Permit* to Harvest:

Fishery Resource	Legal Gear	Administrative Area
------------------	------------	---------------------

Designated Authorized Agent Signature	Title	Date
---------------------------------------	-------	------

Institution Representative Signature	Title	Date
--------------------------------------	-------	------



Commercial Fisheries Entry Commission Credit Card Authorization

PO Box 110302
Juneau, AK 99811-0302
Phone: 907-789-6150
Toll-Free: 1-855-789-6150
Fax: 907-789-6170
www.cfec.state.ak.us

I authorize the Commercial Fisheries Entry Commission (CFEC) to charge the card listed below. This payment is for the items and amount listed, and is valid for a one-time use.

Please indicate the permit and/or vessel numbers in the space provided and the total amount you are authorizing your card to be charged.

FEES TO BE CHARGED TO CARD

Item(s)	Enter Permit & Vessel Numbers	Fee Amount
Permit(s):		\$
Vessel(s):		\$
Transfer Fees:		\$
Duplicate Fees:		\$
Immediate Fishing Fees:		\$
<input type="checkbox"/> Check here to have your licenses express mailed and that you agree to pay the current USPS express mail rate PLUS the CFEC service fee of \$15.00.		
Total amount to be charged		\$

Name of Cardholder: _____

Cardholder Phone Number: _____

Cardholder Signature: _____ Date: _____

Card type: Visa Mastercard Discover

Expiration Date: ____ / ____

Credit Card #: _____ - _____ - _____ - _____

Note: The Commercial Fisheries Entry Commission does not retain credit card information.