



# Commercial Fisheries Entry Commission Request for Return of Original Permit

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 request a permit be returned to its original permit holder after it has been emergency transferred to another individual. The permit card that was issued to the transferee must accompany this completed form. You can submit by mail, fax: **907-789-6170** or email: **dfg.cfec.transfers@alaska.gov**

Date Approved: \_\_\_\_\_ Transfer Officer: \_\_\_\_\_

### Permit Holder Information:

Permit Holder's Name: \_\_\_\_\_ CFEC ID#: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Permanent Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Check if Unlisted \_\_\_\_\_

Temporary Mailing Address (for this permit): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### To be Completed by the Permit Holder:

I am requesting my permit: \_\_\_\_\_ be returned to me for the following reason:

\_\_\_ I want to emergency transfer the permit to a new transferee.

\_\_\_ I am now able to participate in the fishery and I intend to fish the remainder of the season.

\_\_\_ I want the permit back in my name at this time but I will not be fishing the remainder of the year.

You must provide the ADFG number of the vessel that you will be fishing: \_\_\_\_\_

\_\_\_\_\_  
Permit Holder Signature \_\_\_\_\_ Date

**CFEC staff must authorize the permit holder to begin fishing with a copy of this page.** If it is after business hours, please send an email to **dfg.cfec.transfers@alaska.gov**. Once the email is received a determination will be made and you will be contacted as soon as possible.

\_\_\_\_\_  
CFEC Fishery Permit Number/Alpha (CFEC USE ONLY) Year/Sequence/Alpha

**PLEASE MAKE SUFFICIENT COPIES OF THIS FORM TO PROVIDE WITH EACH LANDING TO THE PROCESSOR**

\_\_\_\_\_  
Signature of Agent Printed Name and Title Date Valid