Renewal	
New Permit	

APPLICATION FOR A FISH POT PERMIT

Please complete this form and return it along with a recent (6 months or less) POLICE RECORD to:

The National Conservation Council, P.O. 10202, KY1-1002
Cayman Environment Center, 580 North Sound Rd., George Town, Grand Cayman.

This application will be considered by the Council at the next meeting possible. If approved, you will be notified and may pick up your permit after paying a fee of CI$10.00 at the Department of Environment. ***Police record and all information below are required. Incomplete applications WILL NOT be processed.*** *Application may be published and heard in public by National Conservation Council.*

* FULL NAME: _____/_____/_____
First Middle Last

* RESIDENTIAL ADDRESS: _____/_____/_____/_____
House No. Road District Island

* MAILING ADDRESS: _____/_____
P.O. Box District

* TELEPHONE: _____/_____ DATE OF BIRTH: _____/_____/_____
Work Home Day Month Year

* HOW MANY FISH POT DO YOU WISH TO LICENSE (circle): one (1) or two (2)

* WHERE DO YOU USUALLY SET YOUR FISH POT: _____/_____/_____/_____
District In Sound < 50ft. > 50ft.

* HOW OFTEN DO YOU CHECK YOUR FISH TRAP: Once per :( )Day ( )Week

* HAVE YOU EVER BEEN CONVICTED OF ANY VIOLATION OF THE MARINE CONSERVATION LAW?
( ) No ( ) Yes

* IF YES, EXPLAIN: _____

* ARE YOU FAMILIAR WITH THE NATIONAL CONSERVATION LAWS? ( ) Yes ( ) No

Please sign below indicating that all information provided in this application is true and complete. Any falsification or with holding of relevant information will result in denial or withdrawal of a fish pot permit.

SIGNED,

_____ _____
Signature Date

Official Use:	Approved / Denied / Deferred	Date of Expiry:
Fee Assessed:	Date Paid:	Inspected by:
Number of pots:	Tag #'s:	