

North Carolina Department of Environmental Quality Division of Marine Fisheries COMMERCIAL FISHING VESSEL REGISTRATION TRANSFER (CFVR) APPLICATION INSTRUCTIONS (REV 2022-03)

The Commercial Fishing Vessel Registration is to be transferred when the ownership of a vessel bearing a current Commercial Fishing Vessel Registration is being transferred to a new owner. This application is to be completed and signed by individuals applying for a transfer of a Commercial Fishing Vessel Registration. Both the Transfer-To and the Transfer-From participants are to complete, sign and notarize this application. Businesses requesting a license must have the Responsible Party (business agent) complete and sign the application. The Responsible Party (business agent) is the person who coordinates, supervises or otherwise directs operations of a business entity, such as a corporate officer or executive-level supervisor of business operations and is the person responsible for use of the issued License in compliance with applicable laws and regulations. Individuals applying for a license for another under the authority of Power of Attorney must submit a PHOTOCOPY of the Power of Attorney and current picture identification.

Provide a **PHOTOCOPY** of one of the following current picture identifications:

- Driver's License; or
 - State Identification (issued by DMV); or
- Military Identification; or

- · Passport; or
- Resident Alien Card (green card)

Provide a **PHOTOCOPY** of valid vessel state registration or U.S. Coast Guard Vessel Documentation. If applying for a transfer of ownership and the U.S. Coast Guard Vessel Documentation is pending, a notarized bill of sale will be accepted.

If you are applying as a business, you must provide:

- If incorporated, a **PHOTOCOPY** of Articles of Incorporation and list of current corporate holders.
- If written agreement partnership, a **PHOTOCOPY** of written partnership agreement.
- If not incorporated or written partnership, a **PHOTOCOPY** of current of current Assumed Name Statements filed with the Register of Deeds in your county, and a **PHOTOCOPY** of business privilege tax certificates, if applicable.

A CFVR Transfer Application:

- Complete all the applicable Participant Information, including Participant Identification number. This number is listed to the right of the word *Participant* # on your license. If you do not currently have a license with DMF, please leave this box blank.
- All surveys must be completed.
- Sign the application.
- Certification Statement Form for CFVR Transfers completed, signed by the **Transfer-From** and **Transfer-To**. These signatures need to be notarized. If both **Transfer-From** & **Transfer-To** are signing together use page 4. If the **Transfer-From** & **Transfer-From**

Fees:

- \$10.00 transfer fee
- Method of payment: Personal check, money order or Cashier Check. Make payable to North Carolina Division of Marine Fisheries. There will be \$25.00 service charge for returned checks.

You are required to notify the Division of Marine Fisheries of any address or residency changes within 30 days. Incomplete applications submitted without required documentation will be deemed incomplete and returned to you unprocessed.

Mail to: North Carolina Division of Marine Fisheries

License Office PO Box 769 Morehead City, NC 28557



North Carolina Department of Environmental Quality Division of Marine Fisheries COMMERCIAL FISHING VESSEL REGISTRATION TRANSFER (CFVR) APPLICATION – PAGE 1 (REV 2022-03)

INFORMATION TO BE COMPLETED BY THE TRANSFER-FROM

Participant I.D. First Name			Middle Na	ame	Last Name	Suffix					
				•		-					
Check		. . , .			V	_ , [P-				
☐ Transfer Commercial Fishing Vessel ——➤ CFVR Number to be Transferred ☐————————————————————————————————————											
Select One: ☐ Individual ☐ Business Agent											
Individual or	Business A	gent Pa	rticipant Information			Suffix					
Participant I.I	Э.	First N	ame	Middle	Name	Last Name	Last Name				
Participant I.[1	Rusino	ss Name:			State of Incor	Charter State:				
Farticipant i.t	J.	Dusine	ss manie.			State of incor	Charlet State.				
Business Ow	ner Name (F	M I)	Business Owner/Ag	ent Name	(F.M.I.)	Business Owner/Agent Name (F, M, L)					
Business Ow	ner wante (i ,	ivi, <i>L</i>)	Business Owner, tg	CHI Hame	(i , wi, L)	business owner/Agent Name (1, W, L)					
Check One:			_								
Driver's License ☐ State I.D				Military I.D. [Expire Da		Resident Alien I.D.	Pass	port \square			
NO.				схріге Da	ie / /						
Date of Birth P			y Residence (State)			E-mail Address					
/	_/										
Race Gender: Physical Address			cal Address			Mailing Address					
	M / F										
Height Weight Address 1:						Address 1:					
						A dd					
Address 2:						Address 2:					
Eye Color	Hair Color City: State: Zip:				City:	State:	Zip:				
County: Co				ountry:		County:	Cou	ntry:			
Home Phone: Business Phor			Business Phone:	•	Fax:		Cellular Phone	9:			
() -			() -		() -		() -				

Type of Business Entity (Circle One): Corporation Partnership Sole Proprietorship LLC



North Carolina Department of Environmental Quality Division of Marine Fisheries COMMERCIAL FISHING VESSEL REGISTRATION TRANSFER (CFVR) APPLICATION – PAGE 2 (REV 2022-03)

INFORMATION TO BE COMPLETED BY THE TRANSFER-TO

Select One: 🛘 Individual					□Business Agent								
Individual or Business Agent Participant Information													
Participant I.		First Na		Middle	Name	Last	Last Name			Suffix			
Participant I.D).	Busines	ss Name:			State	e of Incor	Charter State:					
	•							Grianter Graner					
Business Ow	ner Name (F,	M, L)	M, L) Business Owner/Agent Name (F, M, L)					Business Owner/Agent Name (F, M, L)					
Check One:													
Driver's License		State I.D. Military I.D.				Resident A	Resident Alien I.D. Passport						
No. Expire Date / /													
Date of Birth		Drimon	Driver Decidence (Chata)					-mail Address					
Date of Birth		Primary Residence (State)					aaress						
/	_/												
Race	Gender:	Physica	al Address		Mailing Address								
				address									
	M / F												
Height	Weight			Address 1:									
Address 2						Address	Address 2						
Audiess 2						Addicss	Address 2						
Eye Color	Hair Color	City: State: Zip:				City:	City: State: Zip:						
County: Count						County:	County: Country:						
Home Phone		Business Phone: Fax:				Cellular Phone:							
() -		(() -			() -			-				

Type of Business Entity (Circle One): Corporation Partnership Sole Proprietorship LLC



North Carolina Department of Environmental Quality Division of Marine Fisheries COMMERCIAL FISHING VESSEL REGISTRATION TRANSFER (CFVR) APPLICATION – PAGE 3 (REV 2022-03)

Please Complete Required Vessel Survey, Vessel Usage Survey, Vessel Owner Survey and Gear Survey Sections

Vessel Name:					Но	meport:						
US Customs #:			Expire Date		Vessel Year Built:							
				Expire Date								
State Registration #: Vessel Length:				/ /	Hull I.D.: Vessel Manufacturer:							
Port of Landing:					Number of Crew:							
Vessel Master:					Vessel Gross Tons:							
VC33CI Waster.												
Vessel Survey			_									
Carrying Capacity:		Pounds										
Total Horsepower												
Observers Allowed:	☐ YES ☐	NO										
Propulsion:	Outboard			Inboard		ີ Inboard/Oເ	ıtboard		Other			
Hull Material:	☐ Fiberglass			Wood		Aluminum			Steel		Other	
Engine Type:	Gas			Diesel		Other			Other			
Number of Engines:												
Vessel Usage Survey Check all that apply:												
Charterboat	Guide Boat											
Headboat □	Commercial Fishing											
110000000	<u> </u>	ioning —										
Economic Survey (mu	st be complet	ed by Res	noa	sible Par	tv)							
First Name Middl	lle Name Last Na							erived from commercial fishing?			fishing?	
					YES NO							
	1			1								
Signature:				Signa	ature							
Transfer-To Signature Date Must be signed to be valid						Transf	er-From S oe signed	ign I to	ature be valid		Date	-



North Carolina Department of Environmental Quality Division of Marine Fisheries CERTIFICATION STATEMENT FORM FOR COMMERCIAL FISHING VESSEL REGISTRATION TRANSFERS (CFVR) PAGE 4 (REV 2022-03)

(Must be completed, signed, and notarized for each transfer application by the Transfer-To and Transfer-From Participants)

l, _	, certify	that I have the authority to transfer this license #
cur		
	(list name printed on th	he license)
Ce	rtification Statement (This section must be completed by t	the Transfer-To Participant)
ı, _		, certify that:
1.	further, for renewals, any changes in information or suppo	upporting documentation provided is true, accurate, and complete. And orting documents have been provided at the time of renewal. I understand esult in termination of appropriate licenses, permits and related documents d other privileges, and in possible criminal prosecution.
2.	I am a resident of the State of:	<u> </u>
	If claiming resident status in North Carolina, I certify further	er that (check one):
	☐ I have been a legal resident for more than six mo	onths, or
	If domiciled in North Carolina between 60 days a notarized Certificate of Eligibility for North Carolin	and six months, I have completed and submitted with this application a na Residency.
3.	and the privilege to hold such licenses, perm b) I have not been convicted of four or more vic involving or related to marine or estuarine re c) I understand that as a condition of accepting conditions of the permit and agree, that if co	s, permits, endorsements, or registrations under suspension or revocation nits, endorsements, or registrations is not revoked or suspended. olations in any jurisdiction related to state or federal law or regulations
1.		Marine Fisheries to provide a current copy of the rules governing activitien the right to request a current rulebook in hardbound or electronic format.
Dat	te Signed:	Date Signed:
Sig	nature of Transfer-To	Signature of Transfer-From
VO	TARY (All new applications must be notarized)	
Sta	te:	
Cou	unty:	
Swo	orn to and Subscribed before me thisday of	
Nlot	on Public	mission evaluate



North Carolina Department of Environmental Quality Division of Marine Fisheries CERTIFICATION STATEMENT FORM FOR COMMERCIAL FISHING VESSEL REGISTRATION TRANSFERS (CFVR) PAGE 5 (REV 2022-03)

(Must be completed, signed, and notarized for each transfer application by the Transfer-To and Transfer-From Participants) _____, certify that I have the authority to transfer this license # currently issued in the name of _____ (list name printed on the license) Certification Statement (This section must be completed by the Transfer-To Participant) , certify that: All the information provided on this application and any supporting documentation provided is true, accurate, and complete. And further, for renewals, any changes in information or supporting documents have been provided at the time of renewal. I understand that any false information or fraudulent disclosures may result in termination of appropriate licenses, permits and related documents, revocation or suspension of marine fisheries licensing and other privileges, and in possible criminal prosecution. I am a resident of the State of: If claiming resident status in North Carolina, I certify further that (check one): ☐ I have been a legal resident for more than six months, or ☐ If domiciled in North Carolina between 60 days and six months, I have completed and submitted with this application a notarized Certificate of Eligibility for North Carolina Residency. For commercial fishing licenses, permits, endorsements or registrations: I currently have no marine fisheries licenses, permits, endorsements, or registrations under suspension or revocation and the privilege to hold such licenses, permits, endorsements, or registrations is not revoked or suspended. I have not been convicted of four or more violations in any jurisdiction related to state or federal law or regulations b) involving or related to marine or estuarine resources during the previous three years. I understand that as a condition of accepting a permit from the Division of Marine Fisheries, I agree to abide by all c) conditions of the permit and agree, that if conditions of the permit as identified for the permit are violated, or if

4. NC General Statute §113-221 requires the NC Division of Marine Fisheries to provide a current copy of the rules governing activities authorized by the license you are purchasing. You have the right to request a current rulebook in hardbound or electronic format.

suspended or revoked by the Fisheries Director.

false information was provided in the application for initial issuance, renewal or transfer, the permit may be

Transfer-To: Date Signed: Signature of Transfer-To NOTARY	Transfer-From: Date Signed: Signature of Transfer-From NOTARY							
State:	State:							
County:	County:							
I,	I,							