

FOR OFFICE USE:

Date received:

Date approved:

Mussel Relaying Fishery 2024

Exemption Application Form



MUSSEL RELAYING FISHERY 2024 EXEMPTION

I hereby make application to the Eastern Inshore Fisheries and Conservation Authority for the above exemption.

If applicable, complete the form details for 'NOMINATED REPRESENTATIVE' and/or 'NOMINATED DEPUTY' on pages 3 & 4.

PART 1: APPLICANT DETAILS

Full name: _____

Address: _____

_____ Postcode: _____

Phone number: Landline: _____ Mobile: _____

Email address: _____

PART 2: VESSEL DETAILS

Name of vessel: _____

PLN: _____

Defra/MMO fishing licence number (including category): _____

PART 3: DOCUMENTS

All applicants must include **copies** of the following documents with their completed application form:

Certificate of Registry

Defra/MMO fishing licence

PART 4: DECLARATION

I AGREE to follow the conditions and restrictions laid out in my exemption.

I UNDERSTAND that Eastern Inshore Fisheries and Conservation Authority (Eastern IFCA) will hold and use the information contained in this application in accordance with the Data Protection Act 2018, and the associated [privacy notice](#). I understand that the Authority may contact me in relation to my exemption and matters which could affect it (for example returns, byelaw amendments, consultations, etc.).

For more information about how Eastern IFCA store and process data please visit: www.eastern-ifca.gov.uk where you can read the Eastern IFCA Privacy Notice.

Signed: _____ Date: _____

FOR OFFICE USE:

Certificate of Registry:

Defra/MMO fishing licence:

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MUSSEL RELAYING FISHERY 2024 EXEMPTION: NOMINATED REPRESENTATIVE

PART 1: NOMINATED REPRESENTATIVE

Full name: _____

Address: _____

_____ Postcode: _____

Phone number: Landline: _____ Mobile: _____

Email address: _____

PART 2: DECLARATION: EXEMPTION HOLDER

I GIVE MY CONSENT for the Nominated Representative (above) to fish under the authority of my exemption, from the vessel named on page 1 of this application. I will ensure that this person is aware of and understands the wording and requirements of the exemption.

I UNDERSTAND that as the exemption holder I must make an application to Eastern Inshore Fisheries and Conservation Authority (Eastern IFCA) to change a Nominated Representative/Deputy.

I UNDERSTAND that Eastern Inshore Fisheries and Conservation Authority (Eastern IFCA) will hold and use the information contained in this application in accordance with the Data Protection Act 2018, and the associated [privacy notice](#). I understand that the Authority may contact me in relation to my exemption and matters which could affect it (for example returns, byelaw amendments, consultations, etc.).

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Signed: _____ Date: _____

PART 3: DECLARATION: REPRESENTATIVE

I AGREE to follow the conditions and restrictions laid out in my exemption.

I UNDERSTAND that Eastern Inshore Fisheries and Conservation Authority (Eastern IFCA) will hold and use the information contained in this application in accordance with the Data Protection Act 2018, and the associated [privacy notice](#). I understand that the Authority may contact me in relation to my exemption and matters which could affect it (for example returns, byelaw amendments, consultations, etc.).

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Signed: _____ Date: _____

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Mussel Relaying Fishery 2024

Exemption Application Form



MUSSEL RELAYING FISHERY 2024 EXEMPTION: NOMINATED DEPUTY

PART 1: NOMINATED DEPUTY

Full name: _____
Address: _____

Postcode: _____
Phone number: Landline: _____ Mobile: _____
Email address: _____

PART 2: DECLARATION: EXEMPTION HOLDER

I GIVE MY CONSENT for the Nominated Deputy (above) to fish under the authority of my exemption, from the vessel named on page 1 of this application. I will ensure that this person is aware of and understands the wording and requirements of the exemption.

I UNDERSTAND that as the exemption holder I must make an application to Eastern Inshore Fisheries and Conservation Authority (Eastern IFCA) to change a Nominated Representative/Deputy.

I UNDERSTAND that Eastern Inshore Fisheries and Conservation Authority (Eastern IFCA) will hold and use the information contained in this application in accordance with the Data Protection Act 2018, and the associated [privacy notice](#). I understand that the Authority may contact me in relation to my exemption and matters which could affect it (for example returns, byelaw amendments, consultations, etc.).

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Signed: _____ Date: _____

PART 3: DECLARATION: DEPUTY

I AGREE to follow the conditions and restrictions laid out in my exemption.

I UNDERSTAND that Eastern Inshore Fisheries and Conservation Authority (Eastern IFCA) will hold and use the information contained in this application in accordance with the Data Protection Act 2018, and the associated [privacy notice](#). I understand that the Authority may contact me in relation to my exemption and matters which could affect it (for example returns, byelaw amendments, consultations, etc.).

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Signed: _____ Date: _____

Licence / Endorsement Required

Please indicate the licence / endorsements you require

Hand-work

Dredge mussel