

Citizenship Waiver Application for Fishing Vessels

NOTE: All fields MUST be completed. Failing to complete all fields will result in the application being rejected.

Name (*last, first MI*): _____

Address Line 1: _____

Address Line 2: _____

City/State/Zip Code: _____

Work Phone Number: (____) _____ Fax Number: (____) _____

E-mail Address: _____

Vessel Name: _____ Vessel Official Number: _____

Vessel Length: _____ FT Vessel Gross Tonnage: _____ GT

What fisheries will you fish? _____

Number of exemptions you are requesting: _____ Total number of your crew: _____

Start Date of Exemption: _____, _____
Month Day Year

Expiration Date of Exemption: _____, _____
Month Day Year

I have read the G-MOC Policy Letter 01-02 dated June 28, 2001, and I certify that the vessel listed above will operate in compliance with all other applicable citizenship requirements regarding the Master or other officers in charge of deck or engineering watches on documented vessels.

Signature

Date

Note: You MUST include with this application the Department of Labor's (DOL) labor-pool certification from the regional administrator of the DOL in whose jurisdiction the above vessel will operate.

Mail Application To:
Commandant (G—MOC-3)
2100 2nd Street, SW
Washington, DC 20593
Attn: CFVS Citizenship Waiver Representative

Fax Application To:
(202) 267-0506
Attn: CFVS Citizenship Waiver Representative