**1. Your Details**

To apply for a permit you must be the owner of the named relevant fishing vessel. Where joint ownership exists please specify all parties. Lead applicant and main point for correspondence should be submitted as Lead Applicant.

|  |  |  |
| --- | --- | --- |
| **Lead Applicant** |  |  |
| **1a**. Full Name  |  | **1b**. Date of Birth |
|  |  |  |
|  |  |  |
| **1c**. Address (including postcode) |  | **1d**. Telephone Number |
|  |  |  |
|  |  |
|  | **1e**. Mobile Number |
|  |  |
|  |  |
|  | **1f**. Email |
|  |  |

|  |
| --- |
| **Additional Owner** (skip this part if the vessel is not jointly owned) |
| **1g**. Full Name  |  | **1h**. Date of Birth |
|  |  |  |
|  |  |  |
| **1i**. Address (including postcode) |  | **1j**. Telephone Number |
|  |  |  |
|  |  |
|  | **1k**. Mobile Number |
|  |  |
|  |  |
|  | **1l**. Email |
|  |  |

You **must** inform us if you change address during the period of permit and provide us with proof of change i.e. council tax bill, utility bill etc.

**If you require more shared owners please submit additional copies of this page.**

**2. Company Details**

If the vessel is owned by a company complete this section. If the vessel is not owned by a business skip to Section 3.

|  |
| --- |
| **2a**. Name of Business |
|  |
|  |  |  |
| **2b**. Address of Business (including postcode) |  | **2c**. Business Telephone Number |
|  |  |  |
|  |  |
|  | **2d.** Business Email |
|  |  |
|  |  |
|  |  |
|  |  |

**3. Vessel Details**

Please complete the details below:

|  |  |  |
| --- | --- | --- |
| **3a**. Name of Vessel |  | **3b**. Port Letter and Number (PLN) |
|  |  |  |
|  |  |  |
| **3c.** Vessel Registration Number |  | **3d.** Vessel Overall Length (metres) |
|  |  |  |
|  |  |  |

 **3e.**

Does your fishing licence include a shellfish entitlement? Tick the appropriate box.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Yes |  |  | No |

**4. Type of Permit Required**

Please tick the boxes of the permits you require and fill in the number of tags required if less than 25.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Permit** | **Pot Limitations = maximum number of pots permitted** | **State Number of Tags Required** | **Cost** |
|  | Cat 1: Crab & Lobster Class A | No restriction on pot numbers. | No tags required  | £200 |
|  | Cat 1: Crab & Lobster Class B | Max. 25 pots |  | £50 |
|  | Cat 1: Crab & Lobster Class C | Max. 25 pots |  | £50 |
|  | Cat 1: Nephrops | No restriction on pot numbers. | No tags required | £200 |
|  | Cat 1: Prawn & Shrimp | No restriction on pot numbers. | No tags required | £200 |
| **Total Cost** | **£** |

Where applicable the permit fee includes the cost of one set of gear tags, the initial tag applicator and the replacement of one lost or damaged permit sticker.

**5. Permit Holders Named Representative(s)**

A “named representative” means a person qualified to skipper a vessel who has been granted permission to fish from a vessel by a permit holder and is nominated by that permit holder to fish using the permit holder’s permit from that vessel under the same entitlement, conditions and responsibilities as the permit holder in their absence.

|  |  |  |
| --- | --- | --- |
| **Named Representative 1** |  |  |
| **5a**. Full Name |  | **5b**. Date of Birth |
|  |  |  |
|  |  |  |
| **5c**. Address (including postcode) |  | **5d**. Contact Number |
|  |  |  |
|  |  |
|  | **5e**. Email |
|  |  |
| **5f.** Signature of Representative |  | **5g.** Date Signed |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| **Named Representative 2** |  |  |
| **5h**. Full Name |  | **5i**. Date of Birth |
|  |  |  |
|  |  |  |
| **5j**. Address (including postcode) |  | **5k**. Contact Number |
|  |  |  |
|  |  |
|  | **5l**. Email |
|  |  |
| **5m.** Signature of Representative 2 |  | **5n.** Date Signed |
|  |  |  |

**You must also now include a passport sized photograph of all Named Representatives.**

**Please tick this box to confirm you have included it with your application.**

**If you require more representatives please submit additional copies of this page.**

**6. Payment**

This will not be required until the byelaw is confirmed by the Secretary of State at which point NWIFCA will contact you to arrange. Payments will be possible by cheque (allow bank clearing time) or by card over the phone.

|  |  |  |
| --- | --- | --- |
| **6a.**  |  |  |
|  | I wish to Pay by BACS (details included on invoice) |  |  | I wish to pay by card (please allow 4 days for the application form to arrive before calling) |

**7. Collection**

Tags will usually be available for collection from your nearest IFCO. Please specify where you would like to collect your tags from **if applicable**:

|  |  |  |
| --- | --- | --- |
| **7a.**  |  |  |
|  | Liverpool |  |  | Carnforth |
|  | Barrow-In-Furness |  |  | Whitehaven |
|  | Other (please specify) |  |  |  |

**8. Checklist**

Please check that you have enclosed with your application copies of the following documents:

|  |  |  |
| --- | --- | --- |
| **8a. All Applications** |  |  |
|  | Copy of the Vessel's Fishing Licence |  |  |  |
|  | Copy of the Vessel's Certificate of Registry |  |  |  |
|  | Cheque for Permit Fee(s) (if paying by cheque)  |  |  |  |

**9. Your Signature**

By signing, you declare that the information you have supplied on this form and supporting forms is correct and that you will abide by the conditions of the permit.

|  |  |  |
| --- | --- | --- |
| **9a.** Signature |  | **9b.** Date |
|  |  |  |

|  |  |
| --- | --- |
| **Office Use Only** |  |
| **Date Application Received & Complete:** | **Date Paid, How & Inv No:** | **Date of Issue:** | **Date Permit Posted:** | **Tag Nos:** | **New Permit Number:** |
|  |  |  |  |  |  |

**GUIDANCE NOTES**: Please refer to these notes when completing **Form PC1**

**SECTION 1: YOUR DETAILS**

**To be Completed by ALL APPLICANTS**

**To apply for a permit you must be the owner of the named relevant fishing vessel. Where joint ownership exists please specify all parties. Lead applicant and main point for correspondence should be submitted as Lead Applicant.**

**1a-f.** Supply the requested details. The contact details provided here must be for the main point of contact.

**1g-l.** Provide the details of any additional owner of the vessel. If the ownership of the vessel is not shared, skip to section 2.

If there are more than two owners please complete additional copies of page 1.

**SECTION 2: COMPANY DETAILS**

**Complete this section if the vessel is owned by a business. If the vessel is not owned by a business skip to section 3.**

**2a-d.** Supply the requested details of the company.

**SECTION 3: VESSEL DETAILS**

**To be completed by ALL APPLICANTS**

**3a-d.** Supply the requested details.

**3e.** Tick the box appropriate box regarding shellfish entitlement.

**SECTION 4: TYPE OF PERMIT REQUIRED**

**To be completed by ALL APPLICANTS**

**4.** Tick the boxes of the permits you require. Please state the number of tags required where applicable. Total the cost of the permits in the total box at the bottom of the table.

**SECTION 5: PERMIT HOLDERS NAMED REPRESENTATIVES**

**To be completed by ALL APPLICANTS**

**5a-e.** Supply the requested details of the skipper who will be acting under the permit.

**5f-g.** Obtain the signature of the representative skipper and date it.

**5h-n.** If you have more than one skipper fill out the additional boxes provided here.

If you have more representatives please submit additional copies of this page.

**SECTION 6: PAYMENT**

**To be completed by ALL APPLICANTS**

**6a.** Please ensure you enclose the following:

**Permit Fee:** The permit fee(s) for your potting permit(s) must be paid by BACS or by card.

If you wish to pay by card or BACS please call reception during office hours at least 3 working days after posting your application.

If paying by BACS you MUST include your invoice number as reference.

**Do not** leave answer phone messages including payment information.

**Postal orders or cash will not be accepted.**

**SECTION 7: COLLECTION**

**To be completed by ALL APPLICANTS**

**7a.** Please specify where you would like to collect your tags from, if applicable. You will be contacted when your tags are ready for collection.

**SECTION 8: CHECKLIST**

**To be completed by ALL Applicants**

**8a.** Please submit **photocopies** of the Vessel’s Fishing Licence and Vessel’s Certificate of Registry. **DO NOT** submit originals.

**SECTION 9: CHECKLIST**

**To be completed by ALL Applicants**

**9a-b.** Please sign and date the form. Digital signatures are accepted. Unsigned forms will not be processed.

NWIFCA require 4 weeks to check and process permit applications. **Permit letters will be sent via 1st class post. Tags must be collected from a NWIFCA location.**

MARK TAYLOR

Chief Executive

**Privacy Notice**

**Who are we?**

North Western Inshore Fisheries and Conservation Authority (North Western IFCA) was formed in 2011 to manage the sustainable exploitation of sea fisheries resources within the North Western IFCA district. The district spans from the Welsh Border in the Dee Estuary to the Scottish Border in the Solway Firth. The area covered includes coastal Council landward areas and sea areas up to 6 nautical miles off shore.

**What legal reason is my data processed for?**

We have a duty to manage the sustainable exploitation of inshore fisheries resources and to create and enforce byelaws under the Marine and Coastal Access Act 2009. In order to manage the permit and systems established in Potting Permit Byelaw 2020 we need to process your personal data.

**What will my information be used for?**

Your information will be used to administer your potting permit, potting fishery enforcement and to contact you regarding the management of fisheries relating to your potting permit.

**Will my information be shared with any third party?**

We only disclose the information provided in this application form to other statutory agencies or organisations for the prevention and detection of crime.

**How is my information held?**

Your physical application form and supporting information will be held under lock and key.

A digital copy of the information provided is held in digital form on the North Western Inshore Fisheries and Conservation Authority's secure IT system that is hosted by the Lake District National Park Authority.

**How long will my information be held for?**

Your application form will be destroyed within one month of the permit expiring.

The remainder of the digital record will be retained for 7 years after your last permit expires. Following this a reduced record of name, permit type, permit number, town and postcode will be held on record.

If you submit an incomplete application the application form and supporting documents will remain on record for 7 years from the date of application or the last correspondence in relation to the application, whichever is the later.

**Who do I contact about the information you hold?**

If you would like to access any of the information we hold about you or you have concerns regarding the way we have processed your information please contact:

By post: Mark Taylor, NWIFCA, 1 Preston Street, Carnforth, LA5 9BY

By email: office@nw-ifca.gov.uk

If you wish to raise a complaint, we would prefer any complaints to be made to us initially so that we have the opportunity to see if we can put things right.

If you are unhappy with the way we have processed your information or how we have responded to your request to exercise any of your rights in relation to your data, you can raise your concerns direct with the Information Commissioner’s Office.