



APPLICATION FOR REGISTRATION & PERMIT FOR RESEARCH VESSELS

National Oceanic Resource Management Authority
P.O. Box PS122
Palikir, Pohnpei FM 96941
Federated States of Micronesia

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Date: _____

1. Applicant Details:

Name	_____
Address	_____ _____

2. Vessel Identification:

Name of Vessel _____	
Vessel Type: (Select as appropriate)	
Single Purse Seiner <input type="checkbox"/>	Other <input type="checkbox"/> _____ Specify
Longliner <input type="checkbox"/>	
Pole and Liner <input type="checkbox"/>	
Research <input type="checkbox"/>	
Country of Registration _____	Country of Registration Number _____
International Radio Call Sign _____	

3. Vessels Specifications:

Year Built _____	Gross Tonnage _____
Breadth _____	Overall Length _____
Depth _____	Main Engines Power (specify units) _____ Crew Size _____

4. Vessel Refrigeration:

Refrigeration Method			
If Brine, NaCl or CaCl			
Storage Temperature			
Storage Capacity			

5. Catch Landing:

a.			
b.			
c.			

6. Details of Research or Training (In case of multiple voyages during validity period of permit; this item must be completed for each voyage)

Area of Operation			
Itinerary			
Purpose			
Specific Objective			
Method of :	Research		
	Training		
	Other		
Chief Investigator			
Chief Instructor			
Number of Scientific party, if different from crew size (above)			

7. Capacity of Vessel To Accommodate Scientific Participants or Trainees: _____
8. Operation Cost:
- Is Dependent of Catch
 - Not Dependent of Catch(Supporting documents required): _____