



RHODE ISLAND
DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
DIVISION OF COASTAL RESOURCES
301 Great Island Road, The Port of Galilee
Narragansett, RI 02882

RI Summer Flounder Aggregate Landing Program
2019 Winter sub-period
Application Form and Instructions

This application is to obtain a permit to land up to 1,500 pounds of Summer Flounder per vessel per bi-weekly period during the Winter sub-period as specified in the RI Marine Fisheries regulations (RIMFR) “Part 3 - Finfish”. Cumulative landings must occur within the bi-weekly periods are specified below.

Issuance of the permit may take several days upon receipt of a completed application. **It is the responsibility of the applicant to assure the timely and accurate submittal of the application to avoid delays in receiving their permit.**

The 2019 Winter sub-period begins on February 3, 2019 and ends on April 30, 2019, or when 90% of the Winter sub-period quota has been harvested as determined by DFW.

The starting possession limit is 1,500 pounds/vessel/bi-weekly. Possession limits are subject to change throughout the sub-period.

It is the responsibility of the permittee to follow all regulations to maintain compliance with their permit.

Application forms are available on-line at the DEM Marine Fisheries website at: <http://www.dem.ri.gov/programs/fish-wildlife/marine-fisheries/forms-permits.php>, at the Marine Fisheries office in Jamestown, RI, or at the DEM Coastal Resources office in Narragansett, RI (Galilee). Submit the completed application to:

DEM Coastal Resources
301 Great Island Road
Narragansett, RI 02882
Attn: Summer Flounder Aggregate Landing Program

For any further questions, please contact the Division of Coastal Resources at (401)783-5551.

Criteria for eligibility:

1. Eligibility: An applicant vessel shall be considered eligible for a permit to participate in the Aggregate Landing Program by demonstrating to the satisfaction of the DEM and the Division of Law Enforcement each of the following:

- a. The vessel, if harvesting Summer flounder from federal waters, possesses a valid federal Summer Flounder Moratorium Permit and RI Summer Flounder Exemption Certificate (Exemption Certificate);
- b. The vessel’s operator, if harvesting exclusively in State waters, holds a valid RI commercial fishing license to harvest or land summer flounder and possesses a valid Exemption Certificate;
- c. The vessel’s operator has not been assessed a criminal or administrative penalty in the past three years for a violation of this section or has more than one marine fisheries violation.
- d. The operator(s) must hold a valid 2019 commercial license capable of landing summer flounder (i.e. MPURP, PEL, RESLND, NRLNDR).

2. Application: Application for an Aggregate Landing Program Permit shall be made on forms as prescribed by the Director.

3. Non-compliance with the provisions of these regulations or the permit agreement shall subject both the owner and the operator to revocation of enrollment and participation in the commercial fisheries for remainder of the sub-period or the subsequent sub-period. If for any reason a sub-period does not exist by regulation, the privilege of the owner(s) and operator(s) to commercially harvest fish shall be suspended for the same calendar time period as described in the current sub-period upon adjudication.

2019 Bi-weekly periods:

- February 3 through February 16
- February 17 through March 2
- March 3 through March 16
- March 17 through March 30
- March 31 through April 13
- April 14 through April 27
- April 28 through April 30

APPLICATION FORM
2019 RI Summer Flounder Aggregate Landing Program – Winter Sub-period
PLEASE BRING YOUR COMPLETED APPLICATION TO THE COASTAL RESOURCES OFFICE

Vessel Name:	CG#
Vessel Owner Name:	
Vessel Owner Signature:	
Vessel Owner RI Commercial Fishing License #:	
MPURP/PEL/RESLND/NRLNDR (circle one)	
DOB:	Phone number:
Rhode Island Summer Flounder Exemption Certificate Number:	
Vessel Federal Permit Number (if applicable):	

Once processed, your permit will be available in the Coastal Resources office.
If you would like your permit mailed to you, please provide address below:

Name:	Phone:
Street:	City:
State:	Zip Code:

Operator (1) * Name (Print) _____ DOB: _____
 Operator (1) Signature: _____
 RI Commercial Fishing License # MPURP/PEL/RESLND/NRLNDR #: _____
 (CIRCLE ONE)

***If owner is also an operator, identify as Operator (1)**

Operator (2) Name (Print): _____ DOB: _____
 Operator (2) Signature: _____
 RI Commercial Fishing License # MPURP/PEL/RESLND/NRLNDR #: _____
 (CIRCLE ONE)

Operator (3) Name (Print): _____ DOB: _____
 Operator (3) Signature: _____
 RI Commercial Fishing License # MPURP/PEL/RESLND/NRLNDR #: _____
 (CIRCLE ONE)