



RHODE ISLAND
DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
DIVISION OF MARINE FISHERIES
Three Fort Wetherill Road
Jamestown, Rhode Island 02835

2024 RHODE ISLAND WHELK POT TAG ORDER FORM

1. 2023 whelk pot tags remain valid and must remain affixed to pots through March 31, 2024. 2024 tags must be affixed to pots beginning April 1, 2024 and remain valid through March 31, 2025.
2. Tags are ordered through an outside vendor, Cambridge Security Seals. Send the order form directly to CSS at the address provided below. **Order early! Allow for ten (10) weeks processing time to receive your tags after the order is received.**
3. TRAP TAG ORDER:
 - **Original Trap Tags:** These are the primary tags. The number of original tags ordered may be in any amount not to exceed 345 tags, which includes the maximum pot limit of 300 plus an additional 15% to be used ***only*** in the event of routine gear or original tag loss.
 - **Gear Rotation Trap Tags:** Gear Rotation tags are optional. GR tags may only be ordered ***if*** the maximum number of original tags are ordered. The maximum number of gear rotation (GR) trap tags ordered may not exceed 300. GR tags ordered will be sent directly to DMF and will be issued on a one-for-one exchange basis upon receipt of the original tag from the license holder.
 - **Catastrophic Tags:** Catastrophic tags are optional to be used only in the event of a claim of catastrophic loss or original and/or gear rotation tags. Catastrophic tags may not be pre-ordered; please contact the Division to make of claim of catastrophic loss and order tags.
4. **Send order form directly to Cambridge Security Seals at:**

Cambridge Security Seals
One Cambridge Plaza
Pomona, New York 10970
ATTN: RI Whelk Pot Tag Order
5. For questions regarding regulations, contact Peter Duhamel at DEM Marine Fisheries at (401) 423-1927 or peter.duhamel@dem.ri.gov. For questions regarding order processing, contact Cambridge Security Seals at traptag@cambridgeseals.com or 845-520-4111.

2024 RHODE ISLAND WHELK POT TAG ORDER FORM

Name of license/permit holder: _____

Commercial fishing license type and number (***PRINT CLEARLY - THIS NUMBER WILL BE ON THE TAG***):

Multipurpose (MPURP) or Resident Standard (RSTND) _____
(circle one) *(provide 8 digit #)*

Mailing Address (***please print clearly - tags will be sent to this address***):

Street: _____

City/Town: _____ State: _____ Zip: _____

Telephone/email: _____

Vessel Name: _____

Order information:

TRAP TAG TYPE	NUMBER OF TAGS ORDERED*	PRICE	TOTAL COST
Original		\$ 0.27/tag	\$
	* any amount up to 345		
Gear Rotation		\$ 0.27/tag	\$
	* any amount up to 300, only if max 345 original tags ordered		
7% RI SALES TAX (or provide tax exempt form)			\$
ORDER TOTAL			\$

Payment Information: Only certified checks, money orders, and credit cards will be accepted as payment; personal or business checks will not be accepted. **Make checks/money orders out to “Cambridge Security Seals”.**

- Name on Card: _____
- Card number: _____ - _____ - _____ Security code/CVC: _____
- Expiration date (month/year): _____ Billing zip code: _____

Signature: _____

STATE OF RHODE ISLAND - DIVISION OF TAXATION

SALES AND USE TAX

COMMERCIAL FISHERMEN EXEMPTION CERTIFICATE

NAME OF
SELLER: _____ DATE: _____

ADDRESS: _____

I hereby certify that the tangible personal property described below will be used by me exclusively for commercial fishing and is thereby exempt from the sales or use tax, pursuant to Chapter 18, Section 30:

1. The property being purchased will be consumed by me in the production of commercial fishing. (Specify below)
2. The property being purchased is the nets, cables, tackle and other fishing equipment appurtenant to or used in connection with a vessel in excess of five (5) net tons used exclusively in commercial fishing.

NOTE: Refer to Regulation SU 03-22 for further information about exempt status requirements or exempt items.

DESCRIPTION OF
PROPERTY: _____

I agree that if the tangible personal property purchased under this certificate be determined to be taxable, I will pay the tax plus any interest and penalties as provided by law.

PLEASE PRINT:

NAME OF BOAT: _____ NET TONS: _____

All vessel owners wishing tax exempt status must possess a valid Commercial Fishing License.

LICENSE NO.: _____ STATE ISSUED BY: _____ EXPIRATION DATE: _____

OWNER OR CORPORATE
OFFICER: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

TELEPHONE NO.: _____ SIGNATURE: _____