



RHODE ISLAND

DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

DIVISION OF COASTAL RESOURCES

301 Great Island Road, The Port of Galilee

Narragansett, RI 02882

RI 2021 State Waters Atlantic Herring Permit Instructions and Application Form

This application is to obtain a permit to participate in the RI state waters Atlantic herring fishery as specified in the [RI Marine Fisheries Regulations \(RIMFR\), Part 3 - Finfish](#).

It is the responsibility of the permittee to follow all regulations to maintain compliance with their permit. 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 RI state waters Atlantic herring fishery for remainder of the year.

Application forms are available on-line at the DEM Marine Fisheries website at: <http://www.dem.ri.gov/programs/marine-fisheries/forms-permits.php>, at the Marine Fisheries office in Jamestown, RI, or at the DEM Coastal Resources office in Narragansett, RI (Galilee). For any further questions, please contact the Division of Coastal Resources at (401)783-5551. Submit the completed application to:

DEM Coastal Resources
301 Great Island Road
Narragansett, RI 02882
Attn: Atlantic Herring Permit

Eligibility Criteria and Provisions:

1. The vessel must have a RI commercial vessel declaration and the vessel's operator must hold a valid RI commercial fishing license;
2. The vessel's operator must provide a valid email address to RIDMF and have onboard the vessel an electronic device capable of receiving emails from the river herring avoidance network;
3. River herring (alewife and blueback) possession is prohibited while fishing in state waters (captains are advised to follow "move along" advisories when issued);
4. Captains are responsible for impacts with fixed gear, the chart distributed by the Division displaying potential clusters of fixed gear in and around RI state waters must be kept on the vessel.

RI 2021 State Waters Atlantic Herring Fishery Permit Application
PLEASE SUBMIT COMPLETED APPLICATION TO COASTAL RESOURCES

Vessel Name:	CG#
Vessel Owner Name:	
Vessel Owner Signature:	
Email:	

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

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

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

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

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

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