2022 Lobster Trap Tag Order Form

1. This order form is for the purchase of lobster trap tags valid from May 1, 2022 through April 30, 2023 (federal vessels); and June 1, 2022 through May 31, 2023 (state vessels).

2. Tags are ordered through an outside vendor, Cambridge Security Seals. **Place your order as early as possible; allow for ten (10) weeks processing time to receive your tags after the order is received.**

3. If there are any changes to your information (e.g., license #, allocation, contact information, vessel name, federal permit #) or you are unsure of your allocation, please contact DEM Marine Fisheries (DMF) office **prior to submitting your order form. Inaccurate order forms will delay your order processing time!**

4. **TRAP TAG ORDER:** Please see the regulations (section 5.8.1(R)) regarding the types and issuance of RI commercial lobster trap tags.

   - **Original Trap Tags:** The number of original tags ordered may be in any amount not to exceed the license holders authorized allocation, plus an additional 10% over the authorized allocation to be used only in the event of routine gear or original tag loss.

   - **Gear Rotation Trap Tags:** Gear rotation (GR) trap tags may be ordered in any amount may not exceed the licensee’s authorized allocation (i.e., may not include the 10% for routine loss). GR tags should only be ordered if the maximum number of original tags are ordered. GR tags ordered will be sent directly to DMF and will be issued on a one-for-one (1-for-1) exchange basis upon receipt of the original tag.

   - **Catastrophic Loss Trap Tags:** The number of catastrophic tags ordered must be equal to the number of original tags are ordered. Catastrophic tags should only be ordered if the maximum number of original tags are ordered. Catastrophic loss trap tags will be sent directly to DMF and will only be issued upon claim of catastrophic loss.

5. **NEW!!** **Send order form directly to Cambridge Security Seals at:**

   Cambridge Security Seals
   One Cambridge Plaza
   Pomona, New York 10970
   ATTN: RI Lobster Trap Tag Order
   Email: traptag@cambridgeseals.com
   Fax: 845-290-0676

   - cont’d on reverse -
6. For changes to information or questions regarding allocation or 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.
2022 RHODE ISLAND LOBSTER TRAP TAG ORDER FORM

Name of license/permit holder: _____________________________________________________________

Mailing Address (please print clearly - tags will be sent to this address):  
Street: ______________________________________________________________________________
City/Town: __________________________________________ State: _____ Zip: ___________
Telephone/email:  _____________________________________________________________
Vessel Name: _______________________________________________________________________

State vessels (RI state waters): Provide 6-digit commercial fishing/landing license type and number (please print clearly - this number will be on your tags):

MPURP/PEL/CFL  ____  ____  ____  ____  ____  ____  
(circle one) (provide 6 digit #)

Federally permitted vessels (LCMAs 1, 2 and/or 3):

- 6-digit Federal Lobster Permit Number (please print clearly - this number will be on your tags):
  ____  ____  ____  ____  ____  ____

- Lobster Management Conservation Areas Declared (please circle clearly – the LCMA # will be on your tags):
  Area 1 / Area 2 / Area 3 circle all that apply

Order information:

<table>
<thead>
<tr>
<th>TRAP TAG TYPE</th>
<th>NUMBER OF TAGS ORDERED</th>
<th>PRICE</th>
<th>TOTAL COST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Original*</td>
<td></td>
<td>$ 0.17/tag</td>
<td>$</td>
</tr>
<tr>
<td>Gear Rotation*</td>
<td></td>
<td>$ 0.17/tag</td>
<td>$</td>
</tr>
<tr>
<td>Catastrophic Loss*</td>
<td></td>
<td>$ 0.17/tag</td>
<td>$</td>
</tr>
</tbody>
</table>

7% RI SALES TAX (if applicable) $ 
ORDER TOTAL $ 

* Contact DMF if you are unsure of the number of tags. Inaccurate order forms will delay your order processing time!

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

- Name on Card: __________________________________________________________________
- Card number: ________-________-________-________ Security code/CVC: __________
- Expiration date (month/year): ________/_______ Billing zip code: __________________

Signature: _______________________________________________________________________

Telephone 401.423.1923 | www.dem.ri.gov | Rhode Island Relay 711
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:____________________________