

Education/Exhibition SAL Application Florida Fish and Wildlife Conservation Commission Division of Marine Fisheries Management

620 S. Meridian St., Mail Station 4B3, Tallahassee, Florida 32399-1600 (850) 487-0554

Complete all information that is applicable to your license request. If additional space is required other than what is provided on this form, you may provide additional attachments as long as they are clearly marked and identifiable. Documents submitted separately from an application form must be marked (or files named) with the applicant's name and affiliation. Applications will not be evaluated until all requested information and reporting documentation required by previously held licenses have been submitted.

Applications for prohibited species must be separate from an application for non-prohibited species. Applications for Education/Exhibition SALs involving the collection of prohibited species may only be submitted during the following application windows each year: April 1 through April 30, or October 1 through October 31.

lame:				
		Date	of Birth: (mm/dd/yea	r)
Affiliation:				
Mailing Address:				
City:		State:	Zip:	
Country		Phone N	umber	
ax:		Alt. Pho	ne Number	
Email Address*:				
This application is for a(n):	New License	Renewal	Amendment To	Existing License
Previous Special Activity Licens	se Number:			
Time period requested (may not	t exceed 36 months fo	or activities involving	non-prohibited specie	es or 12 months for
activities involving prohibited spec	cies):			
Have you ever received a disposi 828, Florida Statutes, or rules of that relate to the subject matter of the yes, please explain and list the	the Commission, or o	ther similar rules or lught by this applicati	aws in Florida or any on? YES	other jurisdiction NO
Have you ever had a fisheries or If yes, please explain:	wildlife related license	e or permit suspende	ed or revoked? YE	S NO

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applying for this license may result in felony charges and will result in revocation of this license.

B. ELIGIBILITY. An Education/Exhibition SAL may be issued only to the following:

E. LOCATION(S) OF ACTIVITIES. List all counties where requested activities will occur.

- 1. An instructor employed by, or under the sponsorship of, a university, college, secondary school, governmental entity, or a private institution or organization that has an established marine or environmental education curriculum.
- 2. A curator or director employed by or under sponsorship of a public or private aquarium, museum, university, governmental entity, or business establishment that displays marine organisms for viewing by the public and whose activities have a marine-related component.

C. INELIGIBILITY.

- 1. An SAL will not be issued for an activity that is allowed under recreational saltwater fishing regulations.
- 2. An SAL will not be issued to a third-party contractor.
- 3. An SAL will not be issued to a person and no person may conduct activities under an SAL if such person has received a disposition other than acquittal or dismissal of any provisions of chapters 369, 379, or 828, Florida Statutes, or rules of the Commission, or other similar rules or laws in Florida or any other jurisdiction that relate to the subject matter of the authorization sought by this application.
- **D. PROCESSING FEE.** The processing fee for an Education/Exhibition SAL is \$25.00, and is non-refundable. Checks or money orders should be made payable to "FWC" and must be submitted at the same time as the application form. Purchase orders and credit cards cannot be accepted as payment. Payments submitted separate from an application form (because of electronic submission) must include the payment slip available on the last page of this application form.

County	County	County
Will activities be conducted in any Flor	ida state parks? If ves. identify all pa	rks where activities will occur.
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E ALITHODIZED DEDCONNEL Link		

F. AUTHORIZED PERSONNEL. List **legal name and dates of birth** for all personnel who are requested for authorization to conduct activities pursuant to this license in alphabetical order by last name.

	LEG		
First	M.I.	Last	Date of Birth (mm/dd/yyyy)

If the list of requested personnel is extensive, include as an addendum to the application form in MS Excel format.

G. THIRD-PARTY CONTRACTORS. A third-party contractor is an entity that is paid for services rendered to collect or transport marine organisms on behalf of an SAL holder, or paid to provide expertise as an agent or consultant for the relocation of marine organisms on behalf of an SAL holder. Salaried staff or faculty, or non-salaried volunteers, students, interns, or visiting principal investigators who do not receive monetary compensation for their assistance with SAL-authorized activities are not third-party contractors. A third-party contractor may not serve as an agent on behalf of an SAL applicant during the application process.

In order for a third-party contractor to conduct activities pursuant to an SAL, the following requirements must be met:

1. A third-party contractor must be identified as such on the SAL application.

Legal Name

M.I.

Last

First

The SAL applicant must submit with the application a copy of the signed contractual agreement between
the third-party contractor and the applicant that outlines the services to be rendered. The agreement must
denote payment for services rendered during the specific time period requested on the SAL application.
Contractual agreements referencing payment schedules for individual marine organisms will not be
accepted.

List **legal name**, date of birth, and company name for all third-party contractors, and submit a copy of the contract for services with this application form.

Date of Birth | Name of Company

(mm/dd/yyyy)

Provide info	rmati	CILITY DESCRIPTION. ion on the conservation and educate the conservation		displays designed to educate the
			1 7	
		nt facility inventory of all of the spec est pompano, specify how many po	•	rested for collection (e.g., if you are
iquesting to	TIGI V	est pompano, speeny new many po	inpano are carre	entry in the lacinty 5 inventory).
I. For applica	ants r	requesting prohibited species, provi	de the origin, da	ite obtained, and an explanation of
ow each spe	ecime	en was obtained for each prohibited	species current	ly in inventory. Include prior permit
umbers or ir	form	ation under what authority each pro	hibited specime	n was obtained.
		ription of the holding or display tank ust include exhibit themes and dime		·

	I. Provide information on the educational program curriculum.
	II. Provide the qualifications of the educators requesting to conduct activities pursuant to this SAL.
İ	LECTION SUMMARY. Include a description of collection methods, collection strategies that will minimize ty of targeted or bycatch species and an explanation of species non-specific harvest as requested by secapplicable).
t.	HER AGENCY PERMITS. Identify all permits required from other state or federal agencies for the propose in Indicate the date the permit was acquired and submit copies of such permits in conjunction with this action form.
•	S SECTION REQUIRED FOR LICENSE REQUESTS THAT INVOLVE PROHIBITED SPECIES ONLY.
•	I. Is the facility accredited through the Association of Zoos and Aquariums, Marine Aquarium Council, or
	other such aquarium accreditation organization?
	II. Provide information on any captive breeding, husbandry, or research programs the facility may have o involved with.
	III. Provide information on any financial or material support the facility may provide for prohibited species research.
	IV. Provide information on any hosted conferences, workshops, or symposia the facility may have hosted sponsored within the last 12 months for prohibited species husbandry, conservation, or management.
	IV. Provide information on any hosted conferences, workshops, or symposia the facility may have hosted sponsored within the last 12 months for prohibited species husbandry, conservation, or management. V. Provide information on the educational program curriculum as it pertains to the prohibited species requested for collection.

I. THIS SECTION REQUIRED FOR APPLICANTS REQUESTING TO CONDUCT EDUCATIONAL ACTIVITIES.

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VII. Provide the	qualifications of the	educators request	ting to conduct activitie	es pursuant to this SAL.
		•	prohibited species red disposition or de-acce	quested complies with any ession plan or policy.
	-	housed in the hold	ling or display tank wit	th the prohibited species
requested for ha	1 4001.			
requested for ha				
	llection of prohibited	d species from Flo	rida waters or the adja	acent EEZ the only option
X. Why is the co	llection of prohibited	d species from Flo	rida waters or the adja	acent EEZ the only option
X. Why is the co requested activit	llection of prohibitedies?	SESSED. Complet		acent EEZ the only option
X. Why is the co requested activit	llection of prohibited ies? MPORARILY POSS will NOT be perman	SESSED. Complet		arine organisms collected
X. Why is the co requested activit	llection of prohibited ies? MPORARILY POSS will NOT be perman	SESSED. Complet	te this section if the ma	arine organisms collected
X. Why is the co requested activit	llection of prohibited ies? MPORARILY POSS will NOT be perman e temporarily posse	SESSED. Complet nently retained.	te this section if the ma	arine organisms collected

Please be aware that all organisms that are maintained in captivity must be maintained and released in accordance with the "Florida Fish and Wildlife Conservation Commission Policy on the Release of Marine Organisms." A copy of this policy is available at MyFWC.com/license/saltwater/special-activity-licenses.

table if your activities are not species-specific): **Common Name** Scientific Name N. SPECIES TO BE PERMANENTLY RETAINED. I. Species Non-Specific Harvest: If your collection needs are not species-specific, provide the following information: i. Total numbers/amounts required for the duration of the license: _____ ii. Description of the targeted species as specific as possible (such as invertebrates, finfish, gamefish, non-prohibited, etc.): iii. Specify if organisms will be collected in conjunction with another activity (such as invertebrates collected in sediment cores): _ iv. How will the organisms be utilized? v. Any other descriptive information that will aid in the understanding of the activity requested and what the extent of harvest will be: II. Species-specific Harvest: Complete this section if your collections are species-specific. Do not use metric units. Quantities should reflect the total number of organisms to be retained for the duration of the license period. **Common Name Scientific Name** Size at Collection (in) **Total Quantity** If the requested species list is extensive, include this as an addendum to the application form in MS Excel format.

For species-specific activities that involve temporary possession only, list the target species (do not complete this

O. GEAR SPECIFICATIONS. Measurements must be stated in standard units (i.e., inches, feet). **I. TRAPS -** All traps and buoys must be marked as specified in the SAL. # of **Trap Dimensions Throat or Entrance** Trap Type traps Length (in) Width (in) Height (in) Width (in) Height (in) **Baitfish trap** Sea bass trap Lobster trap Stone crab trap Blue crab trap Shrimp trap Other Traps[^] (list below) ^Description of use for "other traps" including targeted species by trap type: II. NETS - Nets must be tended at all times. Attach a statement of justification identified for Section O.II. if this requirement cannot be met. Hand-held nets (Includes dip or landing net) Plankton nets. Provide the number of nets to be used, dimensions of opening diameter and length, and mesh size for each: Cast nets, up to 14' stretched length. Stretched length is defined as the distance from the horn at the center of the net with the net gathered and pulled taut, to the lead line. Drop net: Diameter of opening: _____ (ft) Stretched mesh size:__ _____ (in) Rectangular Nets: Nets may not be wholly or partially constructed of monofilament or multi-strand monofilament, may not exceed 500 square feet of mesh area, and may not exceed a mesh size greater than 2 inches stretched mesh. Nets must be tended at all times, and no more than two nets may be fished from a vessel at one time. **List Net Type Below Net Material** Length (ft) Net Depth (ft) **Stretched Mesh** Soak Time Size (in) 1. 2. 3. 4.

III. TRAWLS. Trawls may not be used in hard bottom or grass bed areas and tow times are limited to 20 minutes or less. No person shall use in nearshore and inshore Florida Waters any trawl with a net or bag containing more than 500 square feet of mesh area.

The perimeter of a trawl is the measurement around the mouth or entrance of the trawl measured as a continuous line from point to point along the line or frame forming the leading edge of the net. The **stretched length** of a trawl is the measurement between the head rope and the end of the bag (stretched, not relaxed) for all trawl types. All measurements are required to process any request for the use of this type of gear.

Trawl Type	Perimeter (ft)	Stretched Length (ft)	Stretched mesh size (in)	Beam width (ft)
Single Otter				
Double Otter (each)				
Skimmer				
Roller Frame				
Beam				

Trawls are required to have Turtle Excluder Devices (TEDs) installed. Exemption from state TED requirements may be granted under this license, but federal TED requirements still apply in state waters. We will contact you if it is determined that you will need to obtain a federal letter of TED exemption.

i. State TED exemption requested? Yes^\ No

ii. Trawl will be fished at the: Surface Bottom

iii. Will the vessel towing the trawl have a mechanical retrieval device onboard? Yes No

iv. All otter trawls are required to have Bycatch Reduction Devices (BRDs) installed.

BRD exemption requested? Yes^^ No

v. Trawls may not be used in hard bottom or grass bed areas.

Exemption requested to use trawl in grass bed areas?

Yes^\to No

IV. OTHER GEAR (Please check):

Hook and Line Quinaldine Bottom Grab^{††} Settlement Tiles or Plates^{††}

Hand Collection Transect Lines^{††} Wood Borer^{††} Hammer/Chisel^{††}

Tongs Sediment Corer^{††} Quadrats^{††}

Other (provide type, specifications, description of gear use, and what species/size will be targeted):

^{††}In waters of the Florida Keys National Marine Sanctuary (FKNMS), the use of these gear types in addition to any type of gear that may alter the sea floor (cinder blocks, rods, etc.) must be permitted by the FKNMS and cannot be licensed for use only by the FWC.

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^{^^}Include a statement of justification identified for Section O.IV.

Note to applicant: the following sections "P" through "R" are informational only and do not require any information to be submitted.

- **P. REPORTING REQUIREMENTS.** SAL holders are required to report information regarding SAL-authorized activities either according to a schedule identified in the license, or upon license expiration. It is the responsibility of the license holder to ensure reporting requirements are submitted on time, regardless of who conducts the SAL-authorized activities.
- **Q. NOTIFICATION REQUIREMENTS.** A license holder must provide notice to the Commission's Division of Law Enforcement of their intent to conduct activities authorized by an SAL no less than 24 hours prior to conducting such activities. The content and submission of such notice shall be made in the manner prescribed on the license holder's SAL.
- **R. LICENSE COPIES.** All authorized personnel must have a copy of the SAL signed by both FWC and the license holder (applicant) in their possession while conducting SAL-authorized activities.
- **S. APPLICATION SUBMISSION.** Applications must be submitted electronically to the Special Activity License Program via email to <a href="mailto-sale-model

FWC – Special Activity License Program 620 S. Meridian St., Mailbox 4B3 Tallahassee, FL 32399-1600

Documents submitted with an application form or separately from an application form must be marked (or files named) with the applicant's name and affiliation. Payments submitted separately from an application form (because of electronic application submission) must attached the payment slip on the next page to ensure the payment is processed and credited to your application.

SPECIAL ACTIVITY LICENSE APPLICATION PROCESSING FEE PAYMENT

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FWC – Special Activity License Program 620 S. Meridian St., Mailbox 4B3 Tallahassee, FL 32399-1600

Please do not staple your pay	ment to this page.	
Applicant name:		
Affiliation:		
Check amount: \$	Check number:	

FWC Accounting EO/Object Code 02-002040