

# **Snook 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 the 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, fees, and reporting documentation required by previously held licenses has been submitted.

A. GENERAL APPLICANT INFO	<b>PRMATION</b> (Please Pri	int or Type)		
Name:		Date o	of Birth: (mm/dd	l/year)
Affiliation/Business Name:				
Mailing Address:				
City:		State:		Zip:
Phone Number		Fax:		
Alt. Phone Number				
Email Address*:				
This application is for a(n):	New License	Renewal	Amendmen	nt To Existing License
Previous Special Activity Licen	se Number:			
Time period requested (may no			id without curren	t aquaculture
certification):				
e-mail or express delivery. Future  Have you ever received a dispos 828, Florida Statutes, or rules of that relate to the subject matter of	ition other than acquitta	al or dismissal of any ner similar rules or la	/ provisions of ch	hapters 369, 379, or
If yes, please explain and list the	type(s) of violation(s) of	cited and the county	state where the	violation occurred:
Have you ever had a fisheries or If yes, please explain:	wildlife related license	or permit suspende	d or revoked?	YES NO
Applicant Signature:			Date:	
Certification: I hereby swear and supporting documents is				

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understand that any false statement herein may subject me to criminal penalties. I further state that I will abide by all applicable State, Federal, and local laws. Any false statements or misrepresentations when

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

# B. ELIGIBILITY.

- 1. A Snook SAL for the harvest of broodstock and production, possession, transport, transfer or sale of the broodstock progeny may be issued only to an owner, director, or manager of a certified aquaculture facility that does not directly discharge production unit water to surface waters of the state.
- 2. A Snook SAL for the receipt, purchase and possession of broodstock progeny may be issued only to the following:
  - a. An owner, director, or manager of a certified aquaculture facility that does not directly discharge production unit water to surface waters of the state, is located in Florida, and is located in the region of the state where the supplier's broodstock originated.
  - b. An owner of a private pond located in Florida and in the region of the state where the supplier's broodstock originated. The private pond must have no connection to surface waters of the state and the lowest point of the top edge of its levee, dike, or bank must be at least one foot above the 100year flood plain by reference to elevation maps issued by the National Flood Insurance Program of the Federal Emergency Management Agency.
  - c. An owner, director, or manager of a fully contained facility located in Florida and in the region of the state where the supplier's broodstock originated. Such facility must be open to the public and conduct activities for exhibitional purposes.

# C. INELIGIBILITY.

- 1. A SAL will not be issued for an activity that is allowed under recreational saltwater fishing regulations.
- 2. A SAL will not be issued to a third party contractor.
- 3. A SAL will not be issued to a person and no person may conduct activities under a SAL if, during the 36-month period prior to the application or activity, that person has been charged with a violation of a rule in Titles 68A through E, F.A.C.; Chapters 370, 372 or 379, F.S.; or 50 CFR Parts 622, 635, 640, 648, 654, 660, or 679 unless that person has received a final disposition of acquittal or dismissal of such charged violation.
- **D. PROCESSING FEE.** The processing fee for a Snook 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.

# E. SCOPE OF AUTHORITY. Special Activity Licenses do not authorize activities:

- 1. Outside of state waters (seaward of 3 nautical miles in the Atlantic Ocean and seaward of 9 nautical miles in the Gulf of Mexico).
- 2. Within a state park, unless a Research/Collecting Permit has been obtained from the Florida Department of Environmental Protection, Division of Recreation and Parks in addition to a SAL.
- 3. Within any federal park.
- 4. Within the following areas of the Florida Keys National Marine Sanctuary (FKNMS): Western Sambo and Tortugas North Ecological Reserves; Cheeca Rocks, Eastern Dry Rocks, Hen and Chickens, Newfound Harbor Key, Rock Key, and Sand Key Sanctuary Preservation Areas (SPAs); or Eastern Sambo Research Only Area.
- 5. Within any Manatee Limited Entry Area (No Entry or Motorboat Prohibited Zones exemptions may be requested on this application form).

**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. If more than 10 personnel are requested, please provide justification. All authorized personnel must meet the eligibility requirements in 68B-8.003, Florida Administrative Code (F.A.C.).

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

If requesting more than 10 authorized personnel, please provide justification.

**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 a SAL holder, or paid to provide expertise as an agent or consultant for the collection or transport of marine organisms on behalf of a SAL holder. Salaried staff or faculty, non-salaried volunteers, students, interns, or visiting principle investigators who do not receive monetary compensation for their collection assistance are not third party contractors. A third party contractor may not serve as an agent for a SAL applicant during the application process.

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

- 1. A third party contractor must be identified as such on the SAL application.
- 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. All third party contractors must meet the eligibility requirements in 68B-8.003, Florida Administrative Code (F.A.C.).

LEGAL NAME				
First	M.I.	Last	Date of Birt (mm/dd/yyy	h Name of Company y)

#### H. FACILITY CERTIFICATION.

I. Submit a copy of your facility's valid aquaculture certification with this application. A Snook SAL will only be valid if the license holder maintains a valid aquaculture certification during the valid license period.

I. How many total m			Sex (M/F)	questing for	harvest?	
mmon Name Scien		Scientific Name		#		
				+		
II. Provide the area one county, please waterbody).						
COLL	ECTION LOCAT	ION		SNOOK	TO BE COLI	_EC
nty	Coast	Watershed		# Male	# Female	To
III. At what time of the		•		,		
	ed description of t	he spawning strate		,		
IV. Provide a detaile  V. Provide your brod	ed description of t	he spawning strate	gy you intend to e	employ for sp	pawning snoo	k.
IV. Provide a detaile	ed description of t	he spawning strate	gy you intend to e	employ for sp	pawning snoo	k.
IV. Provide a detaile  V. Provide your brod	ed description of to	he spawning strate	gy you intend to e	employ for sp	pawning snoo	k.

I. HARVEST OF SNOOK BROODSTOCK, AND PRODUCTION, POSSESSION, TRANSPORT, TRANSFER OR SALE OF SNOOK BROODSTOCK PROGENY. This section is only required for an applicant whose activities involve the harvest of snook broodstock, and production, possession, transport, transfer or sale of snook broodstock

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applicant who is purchasing or receiving snook broodstock and will not harvest snook broodstock from the wild.

II la varia a siri	oto pondin	noted in Florida?	Vaa	No		
• .	•	cated in Florida?		No		
III. In what co	unty is your	private pond loc	ated?			
•	•		ove the 100-year ogram of the Fed			
EAR SPECIFIC	ATIONS. M	easurements mu	ıst be stated in st	andard units (i.e.	., inches, feet).	
I. TRAPS - Al	traps and b	ouoys must be m	arked as specifie	ed in the SAL.	·	
Trap	# of		Trap Dimension		Throat or	Entrance
Туре	traps	Length (in)	Width (in)	Height (in)	Width (in)	Height (
fish trap						
er Traps^ (list b	elow)	T	1	Т		1
^Description o	of use for "o	ther traps" includ	ling targeted spe	cies by trap type:		
^Description o	of use for "o	ther traps" includ	ling targeted spe	cies by trap type:	:	
^Description o	of use for "o	ther traps" includ	ling targeted spe	cies by trap type:	:	
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	ts must be t	ended at all time				ection I.VII if
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II. NETS - Ne requirement of Hand-held	ts must be t annot be m <b>d nets</b> (Incl <b>nets.</b> Provi	ended at all time et. udes dip or landi	s. Please includ	e a statement of	justification in Se	
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II. NETS - Ne requirement of Hand-held Plankton mesh size	ts must be t annot be m d nets (Incl nets. Provi e for each:	ended at all time et. udes dip or landi de the number of	s. Please includ	e a statement of dimensions of dimensions of displaying the displaying displaying the displaying di	justification in Se	and length,
II. NETS - Ne requirement of Hand-held Plankton mesh size	ts must be t annot be m d nets (Incl nets. Provide for each:	ended at all time et. udes dip or landi de the number of	s. Please including net)  f nets to be used.  Stretched length and pulled taut,	e a statement of dimensions of o	justification in Se	and length,

- 1. Nets may not be wholly or partially constructed of monofilament or multistrand monofilament. Braided or twisted nylon, cotton, linen twine, or polypropylene twine are acceptable.
- 2. Nets may not exceed 500 square feet of mesh area.
- 3. Nets may not exceed 2" stretched mesh size.

**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. Please include a statement of justification in Section I.VII if these requirements cannot be met.

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.

	<u> </u>	•	<u> </u>	
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<sup>†</sup> 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<sup>†</sup> No

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

Exemption requested to use trawl in grass bed areas? Yes<sup>†</sup> No

†Include a statement of justification identified for Section K.III.

### IV. OTHER GEAR (Please check):

Hook and Line Quinaldine

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.

**L. REPORTING REQUIREMENTS.** A Snook SAL holder for the harvest of broodstock, and production, possession, transport, transfer or sale of broodstock progeny must submit the following:

An activity report detailing all SAL-related harvest or sampling activities that resulted in the permanent
retention of marine organisms. The activity report must include common and scientific names of the marine
organisms harvested (both targeted and incidental), numbers and sizes harvested, locations of harvest
by county, and disposition of all marine organisms harvested. If SAL-related activities did not result in the
permanent retention or mortality of any marine organism, the SAL holder must submit a statement to that
effect.

- 2. Documentation of each transfer or sale of progeny; a snook SAL holder must provide transfer documentation, a bill of sale or other documentary evidence to each receiver or purchaser of broodstock progeny, and must maintain a record of each transaction. The transfer documentation, bill of sale or other documentary evidence must include the name, address, and aquaculture certificate number of the certified aquaculture facility conducting the transaction, the name and address of the entity receiving or purchasing the broodstock progeny, the transaction date, the quantity of progeny transferred or purchased, the receiver's Snook SAL number, and the exact location where the progeny are being stocked or maintained
- M. NOTIFICATION REQUIREMENTS. All SAL holders must notify the nearest FWC Law Enforcement Regional Communication Center not later than 24 hours prior to conducting activities under a SAL. Notification may consist of a float plan detailing locations, dates, and times of activities. Deviations from the float plan are permitted only after 24-hour advance notification to the nearest FWC Law Enforcement Regional Communication Center. Float plans are valid for the duration of the SAL unless rescinded by the SAL holder.
- **N. LICENSE COPIES.** Please be aware that all authorized personnel or third party contractors must have a copy of the SAL signed by both FWC and the license holder (applicant) in his or her possession while conducting SAL authorized activities.
- **O. APPLICATION SUBMISSION.** Applications may be submitted electronically to the Special Activity License Program (email to SAL@MyFWC.com), faxed to (850) 487-4847, or mailed to the following address:

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

Documents submitted 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 omission or electronic submission) must attach the slip on the next page to the payment in order for it to be processed.

# SPECIAL ACTIVITY LICENSE APPLICATION PROCESSING FEE PAYMENT

The processing fee for a Snook 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 or credit cards cannot be accepted as payment. Payments submitted separate from an application form (because of electronic submission) must include this payment slip to ensure that your payment is credited to your application. Please mail your payment to:

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

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

FWC Accounting EO/Object Code 02-002040

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