

# Application to transfer mud crab fishery units

## Mud Crab Fishery Management Plan

Clause 14A, 14B & 14C

## Information Relating to Applications

This form is to be used by the holder of a licence (Owner or Temporary transferee only) to apply to the Director of Fisheries for a Transfer of Mud Crab Fishery Units.

This is an Application only - once your application has been processed you will be advised of the decision. You are not permitted to carry out any activities in relation to this application until you have received approval from the Director of Fisheries.

### Transfer Fee

No transfer fee applies

(Note: Under Regulation 206 the Minister may prescribe fees)

### Legislation

#### Part 4 Commercial fishing

#### Division 1 Licensing, units of entitlement and nominated places

#### 14 Limitations on licences

- 14(3)** It is a condition of each licence that the licensee must not take mud crabs under the licence if less than 2 units of entitlement are attached to the licence at the time.

*Example for subclause (3)*

*Under clause 14B, a licensee can transfer one or both of the units of entitlement that are attached to the licence. If one unit is transferred, the licensee must not fish for mud crabs under the licence until the transferred unit reverts to the licensee or the licensee takes a transfer of another unit from another licensee.*

#### 14A Unit of entitlement

Subject to a transfer of a unit of entitlement under clause 14B, 2 units of entitlement attach to each licence.

#### 14B Transfer of units

- (1) A unit of entitlement is transferable, but only to a person who holds a licence (including a licence held under a temporary transfer).
- (2) A transfer must be for a period not less than 30 days.
- (3) An application for transfer must be made to the Director in the approved form.
- (4) A transfer is not effective until the Director has approved the transfer in writing.

#### 14C Termination of transfer

A transfer of a unit of entitlement terminates on the earlier of the following:

- (a) the date shown on the application for transfer as the expiry date of the transfer;
- (b) the date on which the transferee ceases to hold a licence;
- (c) the end of the financial year in which the transfer took effect.

For any queries please contact the Fisheries Licensing Office. (08) 8999 2183

## Instructions for completing an application

### To temporary transfer mud crab fishery units

1. Before completing the form **read** these instructions. **Please** use **BLOCK LETTERS** when completing the form.
2. **Licence Holder (Transferor)** - Specify the full name, date of birth, business address, postal address and email address (if applicable) of the licence holder(s) as recorded on the licence.
3. **Details of units to be transferred:** Specify licence number and select type of units being transferred. Specify the date units are to be transferred from (and to for Off-Shore Net and Line, Mud Crab and Pearling Licenses only) and specify the number of units to be transferred (if required).
4. **Details of licensee and Licence receiving units:** Specify the full name, date of birth, business address, postal address and email address (if applicable) of the licence holder(s) as recorded on the licence. Specify the type of units being transferred and Licence Number

### 5. Execution of Application

**Individuals** – All the persons recorded on the register as being holders of the licence must sign and date the application form.

An Executor may only apply if already recorded as Executor on the relevant licence. A copy of the Grant of Probate must be lodged with the application form (unless previously provided).

**Joint Holders** – If the licence is in more than one name (partnership or otherwise), all holders must sign and date this form.

**Corporations** – The Company must properly execute the form in accordance with section 129 of the Corporations Act. Where the form is executed by the sole director and sole company secretary the relevant declaration under section 129 of the Corporations Act must be made.

**Power of Attorney** - If the licence holder has appointed an Attorney, the Attorney signing may be requested to produce the relevant original Power of Attorney document for viewing and a copy for recording.

### Declaration

Under Section 35 of the *Northern Territory Fisheries Act* making false or misleading statements in applications is an offence

### Changes to legislation

Please note that the *Fisheries Act*, regulations and management plans are amended from time to time. Current versions of these documents are available on the Internet and may be viewed at [nt.gov.au](http://nt.gov.au).

### Privacy Statement

Details in this application will be recorded in a Fisheries Register and certain personal details may be released, but will only be done so, in accordance with section 9 of the *Fisheries Act*.

**Office Address:**  
Berrimah Business Park  
33 Vaughan Street  
BERRIMAH NT 0828

**Contacts:**  
Tel: (08) 8999 2183  
Fax: (08) 8999 2057  
Email: [Fisherieslicensing@nt.gov.au](mailto:Fisherieslicensing@nt.gov.au)

**Postal Address:** Fisheries Licensing  
Department of Industry, Tourism  
and Trade  
GPO Box 3000  
DARWIN NT 0801

# Application for transfer of fishery units

Regulation 78E, R & S/ 96CB/ 108/ 122G/ 122J/ 141JS & 141JW of the Fisheries Regulations

Mud Crab Fishery Management Plan Clause 14A, 14B & 14C

Pearl Oyster Culture Industry Management Plan 15(1)a &17(3)

**To the Director:** The licence holder specified below hereby applies to the Director to temporarily transfer fishery units in accordance with Fisheries Regulations or Fishery Management Plans that apply to this licence.

**To the Joint Authority:** The licence holder specified below hereby applies to the Joint Authority to transfer quota units in accordance with Fisheries Regulations that apply to this licence.

1. I declare that I have read the 'Information Relating to Applications' and the 'Instructions for completing an application to transfer Fishery or Quota units.'

## 2. TRANSFEROR'S DETAILS – FROM

Full name of Individual, Corporation or Partnership: .....

If Corporation, name of Director/s

If Partnership, name of partners: .....

Date of Birth: ..... Gender: Male / Female ACN: .....  
Corporation only

Date of Birth: ..... Gender: Male / Female

Residential / Business Address: .....

..... Phone: ..... Fax: .....

Postal Address: .....

Email: ..... Mobile:.....

## 3. SELECT FISHERY:

- |                         |                          |                                     |                          |
|-------------------------|--------------------------|-------------------------------------|--------------------------|
| Coastal Line Quota Unit | <input type="checkbox"/> | Off-Shore Net and Line Fishery Unit | <input type="checkbox"/> |
| Demersal Quota Unit     | <input type="checkbox"/> | Mud Crab Fishery Unit               | <input type="checkbox"/> |
| Timor Reef Quota Unit   | <input type="checkbox"/> | Pearl Oyster Fishery unit           | <input type="checkbox"/> |
|                         |                          | Pearl Oyster Culture Hatchery unit  | <input type="checkbox"/> |

I hereby apply to transfer the following units from licence **A8/** \_\_\_\_\_ effective \_\_\_\_/\_\_\_\_/\_\_\_\_

to \_\_\_\_/\_\_\_\_/\_\_\_\_ (Off-Shore Net &Line/ Mud Crab/Pearl Oyster)

Goldband Snapper _____	Net _____
Red Snapper _____	Line _____
Group Fish: _____	Mud Crab Fishery _____
Black Jew Fish _____	Pearl Fishery: _____
Golden Snapper _____	Pearl Hatchery _____

**Application to transfer mud crab fishery units**

**4. TRANSFEREE'S DETAILS – TO:**

Full name of Individual, Corporation or Partnership: .....

If Corporation, name of Director/s  
 If Partnership, name of partners .....

Date of Birth: ..... Gender: Male / Female ACN: .....  
Corporation only

Date of Birth: ..... Gender: Male / Female

Residential / Business Address: .....  
 ..... Phone: ..... Fax: .....

Postal Address: .....

Email: ..... Mobile:.....

to received ..... unit(s) to be attached to licence number **A8/**\_\_\_\_  
Type of Units

**DECLARATION AND CONSENT**

1. I declare that I have read the 'Information Relating to Applications' and the 'Instructions for completing an application for transfer of an NT Licence.
2. I declare that the information contained in this application is true and correct.

SIGNATURE OF TRANSFEROR(s) & DATE	SIGNATURE OF TRANSFEREE(s) & DATE
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**OFFICE USE ONLY**

This application is: APPROVED/NOT APPROVED

\_\_\_\_\_ OR \_\_\_\_\_

Director of Fisheries or Delegate      Date      Senior Licensing Officer      Date