# Information Relating to the Applications

This application form is to be used by the holder of a fishing licence to transfer quota units in individual transferrable quota managed fisheries.

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 been advised of the decision. Please ensure your contact details (including email addresses) are current.

**Transfer Fee**

No transfer fee applies.

**Legislation**

Relevant legislation relating to the fishery unit transfer can be found in the below specified regulations of the *Fisheries Regulations*.

Coastal Line Fishery – Regulation 78E, 78R & 78S

Demersal Fishery – Regulation 107B, 108

Timor Reef Fishery – Regulation 141JS & 141JW

Offshore Net and Line Fishery – Regulations 96CF, 96CK & 96CL

The Fisheries Regulations can be accessed online at the following web address:

<https://legislation.nt.gov.au/en/Legislation/FISHERIES-REGULATIONS>

# Instructions for completing an application to transfer quota units

1. Beforecompleting the form **read** these instructions. **Please** use **BLOCK LETTERS** when completing the form.
2. **Details of 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 the relevant fishery, licence number and the number of units to be transferred.
4. **Details of transferee:** 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.
5. **Licence receiving units:** Specify the licence number which will receive the units.
6. **Execution of application.** Both the transferor and transferee must sign and date the application form.

**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.

**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*.

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| **Office Address:** | **Contacts:** | **Postal Address:** Fisheries Licensing |
| Berrimah Business Park | Tel: (08) 8999 2183 | Department of Industry, Tourism |
| 33 Vaughan Street | Fax: (08) 8999 2057 | and Trade |
| BERRIMAH NT 0828 | Email: [Fisherieslicensing@nt.gov.au](mailto:Fisherieslicensing@nt.gov.au) | GPO Box 3000 |
|  |  | DARWIN NT 0801 |

# Application for transfer of quota units

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

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

1. I **declare** that I have read the ‘Information Relating to the Applications’ and the ‘Instructions for completing an application to transfer fishery units’.
2. **DETAILS OF TRANSFEROR (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:

1. **DETAILS OF QUOTA UNITS TO BE TRANSFERRED:**

Timor Reef Fishery  Demersal Fishery

Coastal Line Fishery  Offshore Net and Line Fishery

**I am applying to transfer the following quota units from licence A** \_\_\_\_ **/**\_\_\_\_\_\_\_**.**

insert licence number

Goldband Snapper quota units

Red Snapper quota units

Group fish quota units

Black Jewfish quota units

Golden Snapper quota units

Western Zone Grey Mackerel quota units

Eastern Zone Grey Mackerel quota units

Combined Blacktip Shark quota units

Spot-tail Shark quota units

Combined Shark Species quota units

Combined Other Shark Group quota units

Combined Finfish Group quota units

1. **DETAILS OF TRANSFEREE (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:

1. **LICENCE RECEIVING QUOTA UNITS:**

**I am applying to receive the transferred quota units on licence A** \_\_\_\_ **/**\_\_\_\_\_\_\_**.**

insert licence number

**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 |

|  |
| --- |
| **OFFICE USE ONLY**  This application is: APPROVED/NOT APPROVED  OR  Director of Fisheries or Delegate Date Senior Licensing Officer Date |