Virgin Islands Ministry of Education, Culture, Youth Affairs, Fisheries and Agriculture Department of Agriculture and Fisheries



FORM 20 (a)

[Regulation 55 (1)]

APPLICATION FOR PLEASURE FISHING LICENCE

INSTRUCTIONS: Underline Surnames. For "address" provide complete mailing address and physical address, if different. If a detail is not applicable, write NA. **Leave no blanks.**

TO: Director of Agriculture and Fisheries, Department of Agriculture and Fisheries, Paraquita Bay, Tortola, Virgin Islands, VG 1120 Name of Applicant Type of passport (ordinary, diplomatic, etc.) Passport number _____ Nationality _____ Physical address Name of vessel Name of Charter Company or agent Description of vessel Registration number of vessel Date of entry into Territory (dd-mm-yyyy) Date expected to leave (dd-mm-yyyy) Type and description of gear to be used in fishing Period for which fishing license is required Signature of applicant _____ Print name of applicant Email of applicant Telephone number of applicant_____

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