



**Gear Innovation
Special Activity License Application
Florida Fish and Wildlife Conservation Commission
Division of Marine Fisheries Management**

620 S. Meridian St., Mail Station 4B3, Tallahassee, Florida 32399-1600
Ph: 850-487-0554 • Fax: 850-487-4847

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, fees, and reporting documentation required by previously held licenses has been submitted.

A. GENERAL APPLICANT INFORMATION *(Please Print or Type)*

Name: _____ Date of Birth: _____ / _____ / _____

Affiliation/Profession: _____

FWC Commercial Saltwater Products License #: _____

List all endorsements applicable to requested activity: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Number: () _____ Fax: () _____

Alt. Phone Number: () _____

Email Address**: _____

This application is for a(n): New License Renewal Amendment To Existing License

Previous Special Activity License Number: _____

Time period requested (may not exceed 12 months): _____

****To provide more timely exchange of information please check this box:**

I authorize the Florida Fish and Wildlife Conservation Commission (FWC) to send me future correspondence regarding this application, including requests for additional information and final agency permitting actions by either e-mail or express delivery. Future agency actions will be provided henceforth by either e-mail or express delivery.

Have you ever been convicted or found guilty, of any criminal or non-criminal violation, regardless of adjudication, or plea entered, of any fisheries or wildlife violation (including a violation of Chapters 370, 372, 379, F.S.; Section 597.004, F.S.; Title 5L-3.004, F.A.C.; rules of the Commission (Title 68, F.A.C.); 50 CFR Parts 622, 635, 640, 648, 654, 660, or 679; similar laws or rules in another jurisdiction)? YES NO

If yes, please explain and list the type(s) of violation(s) cited and the county/state where the violation occurred:

Have you ever had a fisheries or wildlife related permit suspended or revoked? YES NO

If yes, please explain: _____

Applicant Signature: _____	Date: _____
<i>Certification: I hereby swear and affirm by signature that the information submitted in this application and supporting documents is complete and accurate to the best of my knowledge and belief. I 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. By signing this document, I also agree to comply with the reporting and notification requirements outlined in sections "M" and "N" of this application form.</i>	

B. ELIGIBILITY. A Gear Innovation SAL may be issued only to an individual meeting the following criteria:

- 1) An individual who holds all of the applicable commercial harvesting licenses, permits, or endorsements required for the fishery requested for harvest pursuant to the SAL and,
 - a. Has at least five years experience as a commercial harvester in Florida and has landings of the species targeted for harvest with the innovative gear and,
 - b. Has working knowledge of the area where the gear will be tested.
- 2) An applicant eligible to receive a Scientific Research SAL pursuant to Rule 68B-8.006, F.A.C.

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 Gear Innovation 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).
- 6) Involving the use of entangling gear within any Manatee Entangling Gear Zone.

F. LOCATION(S) OF PROPOSED GEAR USE. List all counties where requested activities will occur. If activities are to be conducted within any state park, specify the park name(s) below.

County	Include state park name (if applicable).

**In waters of the FKNMS, the temporary or permanent placement of any structure or equipment on the sea floor (cages, quadrats, transect lines, tiles, mooring blocks, cinder blocks, settlement plates, etc.), or use of any equipment to alter the sea floor (corers, sediment grabs, dredges, and other sampling devices), must be authorized by the FKNMS. The use of traditional fishing gear does not require authorization.

G. 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 eligibility requirements established in Rule 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: _____

H. 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.
- (2) 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 the application form. All third party contractors must meet eligibility requirements established in Rule 68B-8.003, F.A.C.

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

I. OTHER AGENCY PERMITS. Identify all permits required from other state or federal agencies for the proposed gear use. Indicate the date the permit was acquired or when the application was submitted, and submit copies of those permits or applications along with this application form.

J. GEAR CONSTRUCTION. Provide a detailed description of the proposed gear. Include diagrams, drawings, pictures, or any other demonstrative media that would aid in the understanding of how the gear is constructed.

K. INTENDED USE. Provide a description of the intended use of the gear. Include what species are targeted with the proposed gear, address potential bycatch issues, and address any anticipated impact on the marine environment that the gear may have.

L. BENEFITS TO THE STATE. Provide a summary that describes the benefits to the state through the use of the proposed gear.

M. REPORTING REQUIREMENTS. A Gear Innovation SAL holder must submit a log of activities that includes a daily record of area fished, time fished, catch composition, and any other information required by the Commission to properly evaluate the specific gear being tested, on a schedule specified in the SAL. All documentation required by the Commission pursuant to a SAL or pursuant to any regulation for commercial harvesting activities, including logs and trip tickets, must be available for inspection by the Commission and its employees at any reasonable time. A SAL will not be issued or renewed unless all conditions of a prior SAL held by the applicant were met, and the reporting requirements for the prior SAL were properly and timely submitted.

N. 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.

O. 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.

P. 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 Gear Innovation 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 this payment slip to ensure that your payment is credited to your application, and may be mailed 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