

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 _____