



Commercial Fisheries Entry Commission Request for Return of Original Permit

PO Box 110302
Juneau, AK 99811-0302
Phone: 907-789-6150
Toll-Free: 1-855-789-6150
Fax: 907-789-6170
www.cfec.state.ak.us

Please use this form to request a permit be returned to its original permit holder after it has been emergency transferred to another individual. The permit card that was issued to the transferee must accompany this completed form.

Date Approved: _____ Transfer Officer: _____

Permit Holder Information:

Permit Holder's Name: _____ CFEC ID#: _____ Date of Birth: _____

Permanent Mailing address: _____

City: _____ State: _____ Zip: _____ Phone Number: _____ Check if Unlisted _____

Temporary Mailing Address (for this permit): _____

City: _____ State: _____ Zip: _____

To be Completed by the Permit Holder:

I am requesting my permit: _____ be returned to me for the following reason:

___ I want to emergency transfer the permit to a new transferee.

___ I am now able to participate in the fishery and I intend to fish the remainder of the season.

___ I want the permit back in my name at this time but I will not be fishing the remainder of the year.

You must provide the ADFG number of the vessel that you will be fishing: _____

Permit Holder Signature

Date

CFEC staff must authorize the permit holder to begin fishing with a copy of this page. If it is after business hours, please send an email to dfg.cfec.transfers@alaska.gov. Once the email is received a determination will be made and you will be contacted as soon as possible.

CFEC Fishery

Permit Number/Alpha

(CFEC USE ONLY) Year/Sequence/Alpha

PLEASE MAKE SUFFICIENT COPIES OF THIS FORM TO PROVIDE WITH EACH LANDING TO THE PROCESSOR

Signature of Agent

Printed Name and Title

Date Valid