



# Commercial Fisheries Entry Commission 2025 Aquatic Farm Permit Application

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 apply for a 2025 aquatic farm interim-use permit for the harvest of wild shellfish stocks on a mariculture farm site in Alaska. One permit is required for each individual farm site and will only be issued to the DNR lease and ADFG operation permit holder for that specific aquatic farm site. Harvest permits may only be issued for the species listed on the operation permit for that farm site.

A permit fee of \$75 should be submitted for each farm site. All sections of this form must be completed to avoid delays in processing. Payment may be submitted by check, money order or the attached credit card authorization. You may submit your 2025 Aquatic Farm Permit Application form by fax or email at: **dfg.cfec.licensing@alaska.gov**.

Permit Number: \_\_\_\_\_

### Applicant Information:

Aquatic Farm Name: \_\_\_\_\_

Permanent Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Agent or Contact Person: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Check if Unlisted \_\_\_\_\_ Email Address: \_\_\_\_\_

Temporary Mailing Address (for this permit): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Site Information:

DFG- \_\_\_\_\_ - \_\_\_\_\_ -AF-S \_\_\_\_\_ ADL- \_\_\_\_\_  
DNR Lease Number

Site Number (if applicable) \_\_\_\_\_

Site Location – Be Specific (nearest headland or water body) \_\_\_\_\_

### Fishery Information:

\_\_\_\_\_ Fishery Resource to be Harvested (i.g. geoduck clams)

\_\_\_\_\_ Types of Legal Gear to be Fished

\_\_\_\_\_ ADFG Number(s) of Vessel(s) Being Used

\_\_\_\_\_ Number of Cards Requested (minimum 1 per site)

**Certification:** I swear, under penalty of perjury, that the information provided by me on this form and in all supporting documents is true, complete, and accurately describes the terms and conditions of my request. I understand that intentionally making a false claim on this form or intentionally submitting false documentation in support of my request is a crime punishable by up to one year of imprisonment and/or a \$25,000 fine and may subject me to administrative fines, suspension of fishing privileges, and revocation of any permit I may hold.

\_\_\_\_\_ Signature and Printed Name of Agent

\_\_\_\_\_ Title

\_\_\_\_\_ Date



# Commercial Fisheries Entry Commission Credit Card Authorization

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I authorize the Commercial Fisheries Entry Commission (CFEC) to charge the card listed below. This payment is only valid for the items and amount listed.

Please indicate the permit and/or vessel numbers in the space provided and the total amount you are authorizing your card to be charged.

FEES TO BE CHARGED TO CARD		
Item(s)	Enter Permit & Vessel Numbers	Fee Amount
Permit(s):		\$
Vessel(s):		\$
Transfer Fees (\$50):		\$
Duplicate Fees (\$20):		\$
Immediate Fishing (\$80):		\$
Check here to have your licenses express mailed and that you agree to pay the current USPS express mail rate <b>PLUS</b> the CFEC service fee of \$15.00.		
Total amount to be charged		\$

Name of Cardholder: \_\_\_\_\_

Cardholder Phone Number: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Card type:      Visa          Mastercard          Discover

Expiration Date: \_\_\_\_ / \_\_\_\_

Credit Card #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

DO NOT EMAIL THIS FORM. PLEASE FAX OR MAIL FORM.