



Government of South Australia  
Primary Industries and Resources SA

Fisheries Management Act 2007  
Fisheries Management (Blue Crab Fishery) Regulations 1998

**FEE \$89.50**  
GST exempt  
**01/07/08-30/06/09**  
Processing time: 5  
business days  
Receipt Number:

**BLUE CRAB FISHERY**

**APPLICATION TO CHANGE REGISTRATION OF A MASTER/S**

All applications must be completed in full before being lodged with PIRSA Fisheries Licensing. Applications that are not complete, or that do not have correct documentations attached, will be returned. Please contact PIRSA Fisheries Licensing on (08) 8347 6107 if you have any queries.

**PART A To be completed by the licence holder**

Licence number: .....

Licence holder: .....

If the licence is held by a company, the name and position of the person completing this form: .....

Address .....

..... Postcode .....

List the person(s) who are currently registered and endorsed on the licence as registered master(s):

MASTER 1: .....

MASTER 2: .....

MASTER 3: .....

Nominate the person(s) you seek to be registered master(s) if this application is approved:

MASTER 1: .....

MASTER 2: .....

MASTER 3: .....

**Note: If a new registered master is to be a person other than the holder of the licence, the registered master must complete Part B of the application.**

**PIRSA FISHERIES LICENSING**  
2 Victoria Road, Birkenhead SA 5015  
PO Box 282, Port Adelaide SA 5015  
Telephone (08) 8347 6107 Facsimile (08) 8347 6150  
International Code +618 <http://www.pir.sa.gov.au>

Signed .....

Signature witness by .....

I hereby apply to have the person(s) nominated above to be registered as the master(s) of the registered boat(s) endorsed on the licence.

I .....

of (address) .....

hereby certify that this application is to the best of my knowledge and belief true and accurate. I know that this information is to be used for the purpose of the administration of the *Fisheries Management Act 2007* and if it is false or misleading in a material particular (whether by reason of inclusion or omission of any particular) I may be guilty of an offence.

Dated the ..... of ....., 20 .....

Signed: .....

Witnessed by: .....

(Full Name)

of .....

(address)

Signature of Witness:.....

**PART B To be completed by registered masters not being the holder of the licence**

- I hereby declare that I have read and understood the information contained in this application in relation to licence number.....(*insert number*) upon which it is proposed I am to be endorsed as the registered master of the registered boat or boats endorsed on that licence; and
- I declare that I satisfy the requirements of the *Harbors and Navigation Act 1993* in relation to the crewing of vessels; and
- I declare that I have not been convicted of any offence in any State or Territory of the Commonwealth involving a breach of any State or Commonwealth fisheries legislation during the period of three years immediately preceding the date of this application; and
- I understand that it is an offence under the *Fisheries Management Act 2007* to make a statement that is false or misleading in a material particular; and

Signed .....

Signature witness by .....

- I undertake to comply with all the conditions on the said licence in my capacity as registered master; and
- I understand that I may be liable to prosecution for offences against the Act including breaches of licence condition, committed by any other person in relation to fishing from the registered boat, when I am the master; and
- For the purposes of this application I consent to the release of full details of any convictions or charges for breaches of fisheries related legislation imposed on me in any Australian State or Territory during the period of three years immediately preceding the date of this application. I acknowledge that without this consent being provided, conviction details in some States may not be disclosed.

**Master 1** Name .....D.O.B. ....  
 Postal Address:..... Postcode .....  
 Residential Address:.....Postcode .....  
 Phone numbers: ..... (home) ..... (mobile)  
 Signed..... Date .....

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**Master 2** Name .....D.O.B. ....  
 Postal Address:..... Postcode .....  
 Residential Address:.....Postcode .....  
 Phone numbers: ..... (home) ..... (mobile)  
 Signed..... Date .....

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**Master 3** Name .....D.O.B. ....  
 Postal Address:..... Postcode .....  
 Residential Address:.....Postcode .....  
 Phone numbers: ..... (home) ..... (mobile)  
 Signed ..... Date .....

Signed .....

Signature witness by .....