

NOTIFICATION OF CHANGE OF DETAILS

*Fisheries Management Act 2007
Fisheries Management (General) Regulations 2017 Section 29*

- Licence/Registration Holder
 Registered Master
 Third Party

Name of applicant completing notification:.....
(The applicant must be a Director if the licence is registered in a company name)

Licence or Registration Number

Change of Details:

- Residential Address

 Postal Address

 Home Phone Number
 Business Phone Number
 Mobile Number
 Email Address
 eCatch Email Address
 SMS Alert Mobile Number

DECLARATION OF APPLICANT

I (Natural Person/Director)
(Full name of person completing this form -- individual licence holder or company Director)

hereby certify that this information 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:

<p style="text-align: center;">PIRSA FISHERIES & AQUACULTURE 2 Hamra Avenue, West Beach. SA 5024 GPO Box 1625, Adelaide SA 5001 Telephone (08) 8207 5332 Facsimile (08) 8207 5331 Email PIRSA.FisheriesLicensing@sa.gov.au http://www.pir.sa.gov.au/fisheries/home</p>
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