



# Application to cancel or suspend a fishing boat licence

*Fisheries Management Act 1994*  
*Cl. 121(f) Fisheries Management (General) Regulation 2019*

This form is to be used by a fishing boat licence holder who is requesting to cancel or suspend a fishing boat licence. This form is to be completed in full.

**Applicant details** (Please print in block letters)

Part A: Applicant details			
First Name:		Last Name:	
Date of Birth:		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
ABN: (if applicable)		Registration No (FL): (if applicable)	
Home Address:			
Postal Address:			
Email Address:			
Home Telephone		Mobile:	

Part B: Fishing boat licence for cancellation or suspension		
Licence Identification Number: (LIN)		
I/We request to: (tick appropriate box)		<input type="checkbox"/> Cancel <input type="checkbox"/> Suspend
Have identification details been provided of a boat used under authority of this licence?		<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, provide details:	Boat Name	LFB No (if applicable)

Part C: Applicant Declarations * (see important information on page 2)	
I/We declare that I/we wish to cancel or suspend the fishing boat licence detailed above pursuant to clause 121(f) of the Fisheries Management (General) Regulation 2019. I/We acknowledge that by signing and submitting this application we may forgo any future entitlement in respect of this fishing boat licence: (Tick appropriate box)	
I/We declare that all fees relating to the fishing boat licence have been paid in full	<input type="checkbox"/> Yes <input type="checkbox"/> No
The current fishing boat licence card is enclosed	<input type="checkbox"/> Yes <input type="checkbox"/> No

Part D: Declaration	
I/We declare the information provided in this application is true and correct in every detail	
Name(s):	
Signature(s):	Date:

Office use only			
Entered by:		Registration No:	
INW Reference:		WHF Reference:	

## Important information

### Companies and Partnerships

If the application is made by a partnership, all partners must sign the application. If the application is made by a company, the application must be signed by two Directors or a Director and the Secretary, unless the company is a sole Director company and only has a single director.

If the licence is held by a company, a copy of the current (dated within 30 days of this application) company extract issued by the Australian Securities and Investment Commission must accompany this application.

### Submitting the form

- Email to: [fisheries.businessservices@dpi.nsw.gov.au](mailto:fisheries.businessservices@dpi.nsw.gov.au)
- Fax to: (02) 4424 7449
- Mail to: Fisheries Business Services LMB 3020, NOWRA NSW 2541

For assistance completing this form contact Fisheries Business Services on 1300 720 662 (Mon-Fri 8.30am – 4.30pm, excluding public holidays)

### **Privacy statement**

Your privacy is protected under the Privacy and Personal Information Protection Act 1998. Visit the [Industry Privacy statement](#) for more information about how the Department manages your personal information