



## The Commonwealth of Massachusetts

Division of Marine Fisheries (DMF)

30 Emerson Avenue

Gloucester, Massachusetts 01930

Phone: (617) 626-1520; Email: marine.fish@mass.gov

### Vessel Replacement Form

DMF vessel change policy allows a once per year change on the vessel listed on limited entry permits.

#### Instructions:

- This form must be submitted with a copy of your new vessel's Registration or Documentation and a copy of your federal permit(s) if applicable.
- Please provide all requested information. Incomplete forms may result in the delay processing this request.
- Please ensure you are up to date for all trip level reporting prior to submitting this form, as your reporting type may change.
- Submit this form to the address above with "Attn: Vessel Replacement" included in the address line or email to: marine.fish@mass.gov.

#### Section 1: Permit Holder Information

##### Person Information (if applicable):

First Name	Middle Initial	Last Name	Suffix
Residency Address	City/Town	State Zip Code	Country
Mailing Address (If different than above)	City/Town	State Zip Code	Country
Preferred phone: ( ) -			
Email Address:			

##### Business Information (if applicable):

Business Name:			
Residency Address	City/Town	State Zip Code	Country
Mailing Address (If different than above)	City/Town	State Zip Code	Country
Preferred phone: ( ) -			
Email Address:			

**Section 2: Permit and Vessel information:**

**Commercial Permit Number:** \_\_\_\_\_

**Current Vessel:**

Vessel Name: \_\_\_\_\_ Owner Name: \_\_\_\_\_

Vessel Registration or Coast Guard Documentation Number: \_\_\_\_\_

Federal Permit (if applicable): \_\_\_\_\_ HMS Permit (if applicable): \_\_\_\_\_

Vessel Length: \_\_\_\_\_ Feet \_\_\_\_\_ Inches      Vessel Homeport: \_\_\_\_\_

**Replacement Vessel (include a copy of your registration and federal permit (if applicable):**

Vessel Name: \_\_\_\_\_ Owner Name: \_\_\_\_\_

Vessel Registration or Coast Guard Documentation Number: \_\_\_\_\_

Federal Permit (if applicable): \_\_\_\_\_ HMS Permit (if applicable): \_\_\_\_\_

Vessel Length: \_\_\_\_\_ Feet \_\_\_\_\_ Inches      Vessel Homeport: \_\_\_\_\_

**Section 4. Certification/Signature**

I certify under the pains and penalties of perjury that all information contained in this request is true and accurate to the best of my knowledge and belief.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_