

**COMMERCIAL SPINY DOGFISH LIMITED ENTRY FISHERY
PERMIT TRANSFER EXCEPTION APPLICATION**

Regulation 4 VAC- 20-490-44D. The Commissioner, or his designee, may grant exceptions to prohibition against transfers of the Spiny Dogfish Limited Entry Fishery Permit, as described in subsection B of this section, to any individual who meets any of the following criteria:

1. shall demonstrate a significant hardship, on the basis of health, and shall provide the Commissioner documentation, by an attending Physician, of the medical condition.
2. shall demonstrate a significant hardship, on the basis of a call to active military duty, and shall provide the Commissioner an explanation, in writing, and copy of the military orders for active duty.
3. shall document the retirement or death of the immediate family member permitted for the spiny dogfish limited entry fishery and shall possess a legal Commercial Fisherman Registration License.

Name of current permit holder (Transferor): _____

MRC ID: _____ Phone Number: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Name of Transferee: _____

MRC ID: _____ Phone Number: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Signature of Transferor

Signature of Transferee

To be filled out by Notary Public for Transferor

To be filled out by Notary Public for Transferee

State: _____ City/County: _____

State: _____ City/County: _____

To wit: I, _____,

To wit: I, _____,

a Notary Public, herby certify that

a Notary Public, herby certify that

Whose name is subscribed above, has acknowledged the same before me in my State aforesaid.

Whose name is subscribed above, has acknowledged the same before me in my State aforesaid.

Given under my hand this ____day of _____, 20__.

Given under my hand this ____day of _____, 20__.

Notary Signature

Notary Signature

PLEASE INCLUDE ANY SUBSEQUENT DOCUMENTATION AS PROVIDED FOR BY SECTION 44D OF REGULATION 4 VAC 20-490-10 ET SEQ. WITH THIS FORM FOR REVIEW.

Signature of Commissioner or designee

Date: _____