

DEPARTMENT OF FISHERIES

MINISTRY OF AGRICULTURE, LANDS, FISHERIES AND FORESTRY

APPLICATION FORM FOR A RECREATIONAL FISHING LICENCE

1. Name of applicant:.....
2. Mailing address:.....
3. Name of vessel:.....
4. Description of vessel:.....
5. Registration number of vessel:.....
6. Port of registration:.....
7. Number of persons onboard vessel.....
8. Type and description of fishing gear to be used in
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9. Safety equipment/gadgets on vessel.....
10. Duration of Stay in St. Lucia.....
11. Telephone No. (Home) (Work)

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Signature of Applicant

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Date