

**2006/2007 4VSW COMMERCIAL INDEX PROJECT
APPLICATION FOR PARTICIPATION**

PLEASE PRINT CLEARLY

Captain's Name: (Full Name, No Initials)		Birth Date: dd/mm/yy	
Mailing Address:			Postal Code:
Home Port:	Phone #:	Fax #:	
Describe the area(s) in which you normally fish. Be as specific as possible.			
Describe the area(s) in which you would plan to fish during the Commercial Index Phase. Be as specific as possible.			
During which months are you most likely to do the Commercial Index? (Check all that apply)			
__ July	__ August	__ October	__ December
__ September	__ November	__ January	__ February
__ March			
Crew Information			
Name #1:		Phone #:	
Mailing Address:			Postal Code:
Name #2:		Phone #:	
Mailing Address:			Postal Code:
Name #3:		Phone #:	
Mailing Address:			Postal Code:
Name #4:		Phone #:	
Mailing Address:			Postal Code:
Vessel Information			
Vessel Name:		C.F.V. Number:	
G.R.O. Number (Groundfish License #):		Year Built:	
Date of Last CSI (If Applicable):		Date of Last Life Raft Inspection (If Applicable):	
Construction Material (Wood, Fibreglass, etc.):		Make and Horsepower of Engine:	
Registered Tonnage:		Decked: Yes / No	Overall Length :
Beam:	Number of Bunks: (Sleeping Capacity)	Life Raft: Yes / No If yes, specify type and capacity:	
Other Safety Equipment (Please specify type and number: eg. survival suits, etc.)			
NOTE: Your vessel must meet all Transport Canada requirements for vessels of your size and the area you will be fishing.			
Personal Suitability			

