

File No.

For Office Use Only

COMMONWEALTH OF AUSTRALIA
Fisheries Management Act 1991

APPLICATION FOR REVIEW OF DECISION TO GRANT A FISHING RIGHT

To: The Registrar of the Statutory Fishing Rights Allocation Review Panel,
C/- General Manager
Fisheries and Marine Environment
Department of Agriculture, Fisheries and Forestry
GPO Box 858
Canberra ACT 2601

I apply under subsection 143(1) of the *Fisheries Management Act 1991* for review by the Panel of a decision.

My name is:

My address is:

My postal address is:

The decision that I want reviewed is:
The following decision dated of the Australian Fisheries Management Authority or Joint Authority as the case may be (state which authority):

The name of the person who made the decision is:

The office or title of that person is:

Note: This is a form prescribed by Regulations 24, 25, 26 and 27 of the Fisheries Management Regulations 1992.

The reasons for my application are:

(If insufficient space, please attach and sign additional page/s as necessary.)

(Signature of applicant)

(Date)