

Request for Rock Lobster Horn Tags – South/North

Rock lobster tags can only be ordered by the licence holder, nominated natural person or a supervisor of a Fish Processing Licence or a Fishing Licence (rock lobster) with a Fishing Licence (personal).

Name of applicant

Phone number

Licence entitlement number

Vessel name

Distinguishing mark

Quantity ordered:

 Rock Lobster Horn Tag - SOUTH (Yellow)
 (@ 47 cents per tag plus postage)

 Rock Lobster Horn Tag – NORTH (White)
 (@ 47 cents per tag plus postage)

 Exchange Yellow Tags (issued pre 01/03/2023) for NORTH tags
 (no tag or postage fee)

Send tags to:

Postal address




OR

 Collect (tick box)
Level 1, 134 Macquarie Street, Hobart, Tasmania


Signature of applicant

Date

Submit order form to NRE Tas:

-  **Email** fisheries.licensing@nre.tas.gov.au
-  **Post** GPO Box 44, Hobart, TAS, 7001
-  **Person** Level 1, 134 Macquarie Street, Hobart, Tasmania

Further information:

-  **Phone** 03 6165 3000
-  **Website** www.fishing.tas.gov.au

Method of payment

	Item Code
Tag cost - \$0.47 per tag	8923015423
Postage - \$10.00 300 tags or less	8923017380
Postage - \$10.00 per large envelope per 300 tags	8923017380
Postage - \$30.50 per box – 1000 tags	8923017380

Receipt/payee name

Receipt/payee postal address

Method of payment (tick option required)

- Cheque or money order (payable to NRE Tas Revenue)
- EFTPOS (only at Level 1, 134 Macquarie Street, Hobart, Tasmania)
- Electronic bank transfer to:

Account name: NRE Tas Revenue
 BSB: 037 001
 Account number: 268 083

Attach a copy of the bank transfer receipt, as proof of payment, when lodging the application to the Department, or provide details of bank transfer below:

Amount \$

Date

Reference

For Reference use “RL Horn Tags <Your Name>”.

Office Use Only

Tag Zone/Colour: _____

Expiry Date: _____

First Tag Number: _____

Last Tag Number: _____

Tag Zone/Colour: _____

Expiry Date: _____

First Tag Number: _____

Last Tag Number: _____

Office Use Only

DATE STAMP

Receipt Details

Receipt No:
 Amount:
 Date:
 Signed:

Signed:

Position No:

Transaction No:

Date: