

# NON-SUBSTANTIVE

(See instructions on reverse)

For use by Secretary of State only

STD. 400 (REV. 01-2013)

OAL FILE NUMBERS	NOTICE FILE NUMBER <b>Z-</b>	REGULATORY ACTION NUMBER <b>2014-0506-02N</b>	EMERGENCY NUMBER
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ENDORSED FILED  
 THE OFFICE OF

2014 MAY 22 PM 1:59

For use by Office of Administrative Law (OAL) only	
NOTICE          AGENCY WITH RULEMAKING AUTHORITY Fish and Game Commission	REGULATIONS          AGENCY FILE NUMBER (if any)

2014 MAY -3 PM 4:29  
 OFFICE OF ADMINISTRATIVE LAW

*Debra Bowen*  
 DEBRA BOWEN  
 SECRETARY OF STATE

**A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)**

1. SUBJECT OF NOTICE	TITLE(S)	FIRST SECTION AFFECTED	2. REQUESTED PUBLICATION DATE
3. NOTICE TYPE <input type="checkbox"/> Notice re Proposed Regulatory Action <input type="checkbox"/> Other	4. AGENCY CONTACT PERSON	TELEPHONE NUMBER	FAX NUMBER (Optional)
<b>OAL USE ONLY</b>	ACTION ON PROPOSED NOTICE <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn		NOTICE REGISTER NUMBER PUBLICATION DATE

**B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)**

1a. SUBJECT OF REGULATION(S) Harvesting of Kelp and Other Aquatic Plants	1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S)
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2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics related)	ADOPT
SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)	AMEND
	165
	REPEAL
TITLE(S) 14	

3. TYPE OF FILING

<input type="checkbox"/> Regular Rulemaking (Gov. Code §11346)	<input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §§11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute.	<input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h))	<input checked="" type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100)
<input type="checkbox"/> Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, 11349.4)	<input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1)	<input type="checkbox"/> File & Print	<input type="checkbox"/> Print Only
<input type="checkbox"/> Emergency (Gov. Code, §11346.1(b))		<input type="checkbox"/> Other (Specify) _____	

4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §44 and Gov. Code §11347.1)

5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100)

<input type="checkbox"/> Effective January 1, April 1, July 1, or October 1 (Gov. Code §11343.4(a))	<input type="checkbox"/> Effective on filing with Secretary of State	<input checked="" type="checkbox"/> §100 Changes Without Regulatory Effect	<input type="checkbox"/> Effective other (Specify)
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6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY

<input type="checkbox"/> Department of Finance (Form STD. 399) (SAM §6660)	<input type="checkbox"/> Fair Political Practices Commission	<input type="checkbox"/> State Fire Marshal
<input type="checkbox"/> Other (Specify) _____		

7. CONTACT PERSON Sherrie Fonbuena	TELEPHONE NUMBER (916) 654-9866	FAX NUMBER (Optional)	E MAIL ADDRESS (Optional) Sherrie.Fonbuena@fgc.ca.gov
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8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

SIGNATURE OF AGENCY HEAD OR DESIGNEE <i>Sonke Mastrup</i>	DATE 5/15/14
TYPED NAME AND TITLE OF SIGNATORY Sonke Mastrup, Executive Director	

For use by Office of Administrative Law (OAL) only

**ENDORSED APPROVED**

MAY 22 2014

Office of Administrative Law

## Regulatory Language

Subsection 165(a)(1), Title 14, CCR is amended as follows:

### **§ 165. Harvesting of Kelp and Other Aquatic Plants.**

(a) General License Provisions. Pursuant to the provisions of Section 6651 of the Fish and Game Code, no kelp or other aquatic plants may be harvested for commercial purposes except under a revocable license issued by the department.

- (1) Who Shall be Licensed. Each person harvesting kelp and other aquatic plants for profit shall apply each year for a license on ~~2013~~ 2014 Kelp Harvesting License Application (MRD 658 ~~New 7/13~~ Rev. 9/13) which is incorporated by reference herein. License applications and a list of laws and regulations governing the harvest of kelp and other aquatic plants (including maps depicting administrative kelp beds) are available on request from the department's Los Alamitos office at 4665 Lampson Avenue, Suite C, Los Alamitos, CA 90720.

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Note: Authority cited: Sections 6653 and 6653.5, Fish and Game Code. Reference: Sections 6650, 6651, 6652, 6653, 6653.5, 6654, 6656 and 6680, Fish and Game Code.



California Natural Resources Agen.  
 DEPARTMENT OF FISH AND WILDLIFE  
**2014 KELP HARVESTING LICENSE APPLICATION**  
**FEE: \$141.88** (Valid January 1, 2014 through December 31, 2014)  
 (If issued after January 1, valid on date issued)

<b>KELPHARVESTING</b>
Doc. ID: _____

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY

FIRST NAME		MI.	LAST NAME		GO ID#
BUSINESS NAME				SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	DATE OF BIRTH
MAILING ADDRESS				HAIR COLOR	EYE COLOR
CITY		STATE	ZIP CODE	DAY TELEPHONE ( )	BUSINESS TELEPHONE ( )
STREET ADDRESS				COUNTY	
CITY		STATE	ZIP CODE	E-MAIL ADDRESS (Voluntary)	
BOAT NAME		CA VESSEL REGISTRATION NUMBER		NUMBER OF PROCESSING PLANTS	
METHOD OF HARVESTING <input type="checkbox"/> HAND <input type="checkbox"/> MECHANICAL	CHECK THE BOX FOR EACH TYPE OF AQUATIC PLANT TO BE HARVESTED <input type="checkbox"/> AGAR <input type="checkbox"/> EDIBLE SEAWEED <input type="checkbox"/> BULL KELP <input type="checkbox"/> BULL KELP (HUMAN CONSUMPTION) <input type="checkbox"/> GIANT KELP				
NAME, PLACE, AND DATE OF INCORPORATION					
<input type="checkbox"/> (Required) I understand that I must obtain a valid license from the Department's Los Alamitos office once per year before I begin harvesting agar, kelp, or edible seaweed. I have also read and understand the Kelp Harvesting Regulation Packet. In the event a license is granted, I hereby agree to abide by all conditions of said license and all laws and regulations of the Fish and Game Code of California, and Title 14 of the California Code of Regulations. I am eligible for the indicated license and I am not under revocation or suspension, nor is there a case pending that would restrict me from obtaining a license. I hereby certify that all information contained on this application and/or submitted to meet the requirements for issuance of subject license is true and correct. I understand that, in the event that this information is found to be untrue or incorrect, the license issued will be considered invalid and must be surrendered to the Department of Fish and Wildlife and that I will be subject to criminal prosecution. I understand this license or permit may be suspended or revoked by the Fish and Game Commission if I am convicted of, or plead guilty or nolo contendere to, a Fish and Wildlife violation.					
SIGNATURE X					DATE
<b>FOR DEPARTMENT OF FISH AND WILDLIFE USE ONLY</b>					
ISSUED BY LOS ALAMITOS/DATE		TRANSACTION #		KELP HARVESTING REGULATION PACKET ISSUED <input type="checkbox"/> YES <input type="checkbox"/> NO	

**NEW APPLICANTS MUST INCLUDE VALID IDENTIFICATION WITH THIS APPLICATION**

