

Shark Safe Application



Basic information

Type of business: Restaurant Seafood Market Seafood Supplier Grocery Store

Business name: _____

Business address: _____ Mailing address (if different): _____

Website: _____

Contact Person

Name: _____

Title/Position: _____

Phone number: _____

Fax number: _____

E-mail address: _____

For All Applicants

Please provide a detailed list of seafood offerings (*photocopies accepted*):

For Restaurants, Markets and Stores

List seafood supplier(s):

For Seafood Suppliers

List or attach information about allowable fishing methods and equipment:

Please describe any other conservation practices / policies at your business.

How did you hear about Shark Safe?

- Internet (list website): _____
- Friend: _____
- Newspaper: _____
- Magazine: _____
- Window sticker
- Other: _____