

APPLICATION FOR TRANSFER OF CRAB QS/IFQ or PQS/IPQ

U.S. Dept. of Commerce/NOAA
 National Marine Fisheries Service (NMFS)
 Restricted Access Management (RAM)
 P.O. Box 21668
 Juneau, AK 99802-1668



Notes:

- Applications to transfer Quota Share (QS), Individual Fishing Quota (IFQ), Processing Quota Share (PQS), or Individual Processing Quota (IPQ) will not be processed between August 1 of any year and the date of issuance of the IFQ or IPQ in any given Bering Sea or Aleutian Island Crab Rationalization Fishery.
- This form should not be used to apply for a transfer of QS/IFQ or PQS/IPQ to, or from, an Eligible Crab Community Organization (ECCO) or to, or from, a Crab Harvesting Cooperative.

BLOCK A – TYPE OF TRANSFER

1. Indicate the type(s) of Quota for which a transfer is being sought:

CPO QS/IFQ [] CVO QS/IFQ [] CPC QS/IFQ [] CVC QS/IFQ [] PQS/IPQ []

CVO/CPO IFQ Lease [] CVC/CPC IFQ lease [] IPQ lease []

2. If this is a transfer of PQS or IPQ, will the PQS or IPQ be used within the ROFR community with which the PQS is currently associated? YES [] NO []

If YES, indicate which community _____

and provide an affidavit stating that the ECC wishes to permanently waive ROFR for the PQS or that the proposed recipient of the PQS has completed a ROFR contract with the ECC for the PQS.

BLOCK B - TRANSFEROR (SELLER)

(The transferor is the person currently holding the QS, PQS, IFQ, or IPQ)

1. Name:

2. NMFS Person ID:

3. Permanent Business Mailing Address:

4. Temporary Business Mailing Address:

5. Business Telephone No.:

6. Business Fax No.:

7. E-mail address (if available)

BLOCK D₁ – IDENTIFICATION AND COST OF QUOTA TO BE TRANSFERRED

If Transfer Application is for more QS/IFQ or PQS/IPQ than the space provided on this form allows, duplicate this page as necessary to include all intended transfers with one application .

1. Identification of Quota Share or Processor Quota Share (QS/PQS) Quota (from Report of Quota Holdings):

Fishery	Sector*	Region	Beginning Serial Number	Ending Serial Number	QS
_____	_____	_____	_____	_____	_____

***Note: If transfer of CPO Quota, complete Questions 3 and 4 below**

2. Are any current year IFQ/IPQ Pounds to transfer with the QS/PQS?

YES [] NO []

If YES, complete the following:

Permit Number: _____ Class (A or B): _____ Pounds: _____

3. How is the CPO QS to be designated after the transfer?

CPO QS Only [] CVO QS and PQS []*

***Note: If CPO QS is transferred as both CPO QS and PQS, the resulting ratio of CVO shares to PQS shares will be 1:0.9 (i.e., 1 CVO share to 0.9 PQS shares)**

4. If intended to be designated as CVO QS and PQS, indicate the region (as appropriate for the fishery):

North [] South [] West [] Undesignated []

Complete the following for the Quota Share identified above. If the transfer is part of a group of transfers for one consolidated price, determine the value of each segment and report it below. This information is being collected to facilitate analysis of the performance of the Crab Rationalization Program and will be held in strictest confidence.

5. What is the total price of the Quota, including all fees and other transaction costs? \$ _____

6. What is the price per Unit of QS? \$ _____ What is the price per pound of crab? \$ _____
(Price divided by Units) (Price divided by Pounds)

**BLOCK D₂ – TRANSFER OF ANNUAL IFQ OR IPQ ONLY [“LEASE” OF IFQ/IPQ]
IDENTIFICATION AND COST OF IFQ/IPQ**

If Transfer Application is for more IFQ or IPQ than the space provided on this form allows, **duplicate this page** as necessary to include all intended transfers with one application.

1. Identification of Annual IFQ or IPQ Permit to be transferred (“Leased”) – complete for each separate permit:

Permit No.	Fishery	Sector*	Region	Class (A or B)	IFQ Pounds
_____	_____	_____	_____	_____	_____

Complete the following for the IFQ/IPQ identified above. If the transfer is part of a group of transfers for one consolidated price, determine the value of each segment and report it below. This information is being collected to facilitate analysis of the performance of the Crab Rationalization Program and will be held in strictest confidence.

2. What is the total price of the IFQ/IPQ, including all fees and other transaction costs? \$ _____

a. Is the same price per pound applicable to both Class A and Class B IFQ? YES [] NO []

b. **If NO**, please provide price per pound by class.

3. What is the price per Pound of IFQ/IPQ? \$ _____

(Price divided by Units)

4. If the price is based on a percentage of the ex-vessel value, what is the percentage being charged? _____%

1. Identification of Annual IFQ or IPQ Permit to be transferred (“Leased”) – complete for each separate permit:

Permit No.	Fishery	Sector*	Region	Class (A or B)	IFQ Pounds
_____	_____	_____	_____	_____	_____

Complete the following for the IFQ/IPQ identified above. If the transfer is part of a group of transfers for one consolidated price, determine the value of each segment and report it below. This information is being collected to facilitate analysis of the performance of the Crab Rationalization Program and will be held in strictest confidence.

2. What is the total price of the IFQ/IPQ, including all fees and other transaction costs? \$ _____

a. Is the same price per pound applicable to both Class A and Class B IFQ? YES [] NO []

b. **If NO**, please provide price per pound by class.

3. What is the price per Pound of IFQ/IPQ? \$ _____

(Price divided by Units)

4. If the price is based on a percentage of the ex-vessel value, what is the percentage being charged? _____%

BLOCK E₁ – SURVEY QUESTIONS FOR TRANSFEROR (SELLER)

Why are you proposing to transfer the Quota (check all reasons that apply)?

- Retirement from fisheries Shares too small to fish Consolidation of shares
Pursue non-fishing activities Trading shares Other (please describe)
Health problems Enter other fisheries Hardship (please describe)

Describe “Hardship” or “Other” Reason (if applicable):

2. Is a Permit Broker being used for this transaction? YES NO

If YES,” how much is being paid in broker fees? \$ _____; or _____% of total price of Quota

BLOCK E₂ -- SURVEY QUESTIONS FOR TRANSFEREE (BUYER)

1. Will the Quota to be transferred under this application be used as collateral for a loan? YES NO

If YES, please identify the party with an interest in the Quota: _____

2. What is your primary source of financing for Quota to be transferred under this application?

- Self – Personal Resources AK – CFAB Gift (no financing)
 Private Bank/Credit Union Transferor/Seller NOAA Fisheries Loan
 AK Division of Investments Processor/Fishing Company Other (describe below)

Explain “Other” source of financing:

3. How was the Quota located (check all sources that apply)?

- Advertisement/Public Notice Direct Notice from Transferor
 Permit Broker Other (explain below)

Explain “Other” Source

4. What is the relationship, if any, between the proposed Transferor and the proposed Transferee?

- No Relationship Business Partner Other (explain below)
 Family Member Friend or Acquaintance

Describe “Other” Relationship:

BLOCK F₁ – CERTIFICATION OF TRANSFEROR

Under penalty of perjury, I certify by my signature below that I have examined the information and the claims provided on this application and, to the best of my knowledge and belief, the information presented here is true, correct, and complete.

1. Signature of Transferor:

2. Date:

3. Printed Name Transferor (If completed by authorized representative, attach authorization):

4. Notary Public Signature:

ATTEST

5. Affix Notary Stamp or Seal Here:

6. Commission Expires:

BLOCK F₂ – CERTIFICATION OF TRANSFEREE

Under penalty of perjury, I certify by my signature below that I have examined the information and the claims provided on this application and, to the best of my knowledge and belief, the information presented here is true, correct, and complete.

1. Signature of Transferee:

2. Date:

3. Printed Name of Transferee:

4. Notary Public Signature:

ATTEST

5. Affix Notary Stamp or Seal Here:

6. Commission Expires:

PUBLIC REPORTING BURDEN STATEMENT

Public reporting for this collection of information is estimated to average 2 hours per response, including the time for reviewing the instructions, searching the existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Assistant Regional Administrator, Sustainable Fisheries Division, NOAA National Marine Fisheries Service, P.O. Box 21668, Juneau, AK 99802-1668.

ADDITIONAL INFORMATION

Before completing this form please note the following: 1) Notwithstanding any other provision of law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information, subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number; 2) This information is mandatory and is required to manage commercial fishing efforts under 50 CFR part 680, under section 402(a) of the Magnuson-Stevens Act (16 U.S.C. 1801, *et seq.*) and under 16 U.S.C. 1862(j); 3) Responses to this information request are confidential under section 104(b) of the Magnuson-Stevens Act. They are also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics.

<p>INSTRUCTIONS</p> <p>Application for Transfer of Crab QS/IFQ or PQS/IPQ</p>
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GENERAL INFORMATION

This application can not be processed or approved unless both parties to the proposed transfer have met all the requirements and conditions of the BSAI Crab Rationalization Program, including (as appropriate):

- ◆ Submission of an Economic Data Report (EDR) to Pacific States Marine Fisheries Commission, 205 SE Spokane, Suite 100, Portland, OR 97202
- ◆ Payment of all outstanding fees to NMFS

The application will not be processed or approved unless it is complete; in addition to providing the information required by the Application for Transfer form, a complete application will include:

- ◆ *[for all applicants]*, a copy of the terms and conditions of the transfer agreement; such documentation may consist of a bill of sale, promissory note, or other document that reveals the contraction terms between the parties;
- ◆ *[for applicants seeking a transfer of IFQ to address a hardship]*, full documentation of the nature of the hardship and the need for the requested transfer is provided; and,
- ◆ *[for applicants seeking the transfer of PQS/IPQ for use outside an Eligible Crab Community (ECC) with a Right of First Refusal (ROFR) agreement]*, an affidavit stating that notice of the proposed transfer has been provided to the Eligible Crab Community Entity (ECCE) under civil contract terms for the transfer of any PQS or IPQ subject to ROFR.

Additionally:

- ◆ Applications for the Transfer QS/IFQ, PQS/IPQ will not be processed between August 1 of any year and the date of issuance of the IFQ or IPQ in any given Bering Sea or Aleutian Island Crab Rationalization Fishery.
- ◆ This form should not be used to apply for a transfer of QS/IFQ or PQS/IPQ to, or from, an Eligible Crab Community Organization (ECCO) or to, or from, a Crab Harvesting Cooperative.

Please insure that all information provided on the form, or with the form, is clear and legible. Further, an application that does not bear the original, notarized, signature of the proposed transferor and the proposed transferee (or their authorized representatives) will not be processed.

Allow up to ten (10) working days for a transfer application to be reviewed, processed, and approved; the parties will be notified upon approval of the transfer.

When complete, mail the application to:

**Alaska Region, NOAA Fisheries (NMFS)
Restricted Access Management (RAM)
P.O. Box 21668
Juneau, AK 99802-1668**

Or deliver to:

**NOAA Fisheries,
Alaska Region (NMFS/RAM)
Federal Building
709 W. 9th Street, Suite 713
Juneau, Alaska 99801**

Items will be sent by first class mail, unless you provide alternate instructions and include a prepaid mailer with appropriate postage or a corporate account number for express delivery. Additional information is available from RAM, which may be reached at the above address or as follows:

**Telephone (toll free): 800-304-4846 (press “2”)
Telephone (in Juneau): 907-586-7202 (press “2”)
Fax: 907-586-7354
E-Mail: RAM.Alaska@noaa.gov**

COMPLETING THE FORM

BLOCK A – TYPE OF TRANSFER

Indicate the type(s) of Quota for which an Application to Transfer is being submitted. The different types of Quota that may be transferred using this form as an Application include:

Catcher-Processor “Owner” Quota and annual Individual Fishing Quota	(CPO QS/IFQ)
Catcher-Processor “Captain/Crew” Quota and annual Individual Fishing Quota	(CPC QS/IFQ)
Catcher Vessel “Owner” Quota and annual Individual Fishing Quota	(CVO QS/IFQ)
Catcher Vessel “Captain/Crew” Quota and annual Individual Fishing Quota	(CVC QS/IFQ)
Processing Quota Share and annual Individual Processing Quota	(PQS/IPQ)
Catcher Vessel Owner or Catcher Processor Owner Individual Fishing Quota	(CVO/CPC IFQ Only)
Catcher Vessel “Captain/Crew” or Catcher-Processor “Captain/Crew” Individual Fishing Quota	(CVC/CPC IFQ Only)
Annual Individual Processing Quota Only	(IPQ) Only

If a transfer of PQS, indicate whether the PQS will be used within the Right of First Refusal (ROFR) community within which the PQS is currently associated; if “YES,” provide an affidavit stating that the Eligible Crab Community wishes to permanently waive ROFR for the PQS or that the proposed recipient of the PQS has completed a ROFR contract with the ECC for the PQS.

BLOCK B – IDENTIFICATION OF PROPOSED TRANSFEROR (SELLER)

1. Enter the full, legal, business name of the person that holds Quota and wishes to transfer it;
2. Enter the person’s NMFS Person ID;

3. Enter the person's Permanent Business Mailing Address;
4. Enter the person's Temporary Business Mailing Address (this is the address, if different from #3, to which the applicant wishes materials to be sent);
- 5 – 7. Enter the person's business telephone number, business fax number, and e-mail address.

BLOCK C1 – IDENTIFICATION OF PROPOSED TRANSFEREE (BUYER)

1. Enter the full, legal, business name of the person that wishes to receive the Quota by transfer;
2. Enter the person's NMFS Person ID;
3. Enter the person's Permanent Business Mailing Address.
4. Enter the person's Temporary Business Mailing Address (this is the address, if different from #3, to which the applicant wishes materials to be sent);
- 5 – 7. Enter the person's business telephone number, business fax number, and e-mail address.

BLOCK C2 – ELIGIBILITY OF PROPOSED TRANSFEREE

The following standards pertain to eligibility to receive BSAI Crab Rationalization Quota by transfer:

Quota Type	Eligible Person	Eligibility Standards
PQS	Any Person	No other requirements
IPQ	Any Person	No other requirements
CVO or CPO QS	a) A person who received QS by initial issuance	No other requirements
	b) An Individual	who is a U.S. citizen and who has at least 150 days experience as part of the harvesting crew in any U.S. commercial fishery
	c) A corporation, partnership, association or other non-individual entity	that has at least one individual member (owner) who is a U.S. citizen and who: a) owns at least 20% of the entity, and b) has at least 150 days experience as part of the harvesting crew in any U.S. commercial fishery
	d) An ECCO	that meets other regulatory requirements
	e) A CDQ Group	No other requirements
CVO or CPO IFQ	All persons eligible for CVO or CPO QS	No other requirements
CVC or CPC QS	An Individual	who is a U.S. citizen and who has a) at least 150 days experience as part of the harvesting crew in any U.S. commercial fishery and, b) recent participation in a BSAI Crab Rationalization fishery in the 365 days prior to submitting an application for eligibility, and at time of transfer
CVC or CPC IFQ	An Individual	who satisfies the eligibility requirements for receiving CVC or CPC QS by transfer

1. Indicate whether the proposed transferee is seeking to receive CVO or CPO (and associated IFQ, if applicable) by transfer.

If YES, indicate whether the transferee is eligible to receive the CVO/CPO QS/IFQ according to the standards above and has verification to that effect issued by RAM;

If NO, the proposed transferee must apply for eligibility to receive CVO/CPO QS/IFQ by transfer and such application must be approved by RAM before the transfer application can proceed through processing.

2. Indicate whether the proposed transferee is seeking to receive CVC or CPC (and associated IFQ, if applicable) by transfer;

If YES, indicate whether the transferee is eligible to receive the CVC/CPC QS/IFQ according to the standards above and has verification to that effect issued by RAM;

If NO, the proposed transferee must apply for eligibility to receive CVC/CPC QS/IFQ by transfer and such application must be approved by RAM before the transfer application can proceed through processing.

BLOCK D₁ – IDENTIFICATION AND COST OF QUOTA TO BE TRANSFERRED

Each unit of BSAI Crab Rationalization QS and PQS is identified by an alpha-numeric code. The alphabetical portion of the code indicates the Fishery, the Type, and the Region for which the Quota will yield annual IFQ or IPQ. The possible combinations include:

Crab Fishery	Code	Sector of QS	Code	Region	Code
Bristol Bay red king	BBR	Catcher Vessel Owner	CVO	North	N
Bering Sea snow	BSS	Catcher/Processor Owner	CPO	South	S
Bering Sea Tanner	BST	Catcher Vessel Captain/Crew	CVC	West	W
Eastern Aleutian Golden	EAG	Catcher/Processor Captain/Crew	CPC	Undesignated	U
Pribilof red and blue king	PIK	Processor Quota	PQS		
St. Matthew blue king	SMB				
Western Aleutian golden	WAG				
Western Aleutian red king	WAI				

1. Enter the correct Fishery, Sector, and Region Code, as well as the beginning serial number and the ending serial number as set out on the Report of Quota Holding issued by RAM.
2. Indicate whether any current year IFQ or IPQ pounds are intended to transfer with the QS or PQS.

If YES, Enter the IFQ or IPQ Permit Number, the Class of IFQ (“A” - if delivery restrictions apply, or “B” - if such restrictions do not apply), and the number of Pounds from that Permit that are intended to transfer.

3. Indicate whether CPO QS will be re-designated upon transfer.

Note that, if CPO QS is being transferred, the prospective transferee may choose to re-designate the QS as CVO QS and PQS. If such an election is made, the resulting QS will transfer in the ratio of 1:0.9 [i.e., 1 CVO share to 0.9 PQS shares].

4. If the choice is made to re-designate the QS as CVO QS and PQS, indicate the Region to which the resulting re-designated Quota will be assigned.

Enter the same information for all CPO QS for which application is being made to transfer.

If necessary, duplicate the pages to include segments of CPO QS to be transferred.

Note that the IFQ and the IPQ that the re-designated QS will yield will not be issued until the crab fishing year following the year in which the transfer and re-designation was approved.

5. Enter the total price of the Quota, including all fees and other transaction costs.
6. Indicate the price/unit of QS and the price/pound of IFQ or IPQ crab.

BLOCK D2 – TRANSFER OF ANNUAL INDIVIDUAL FISHING QUOTA OR INDIVIDUAL PROCESSING QUOTA (IFQ OR IPQ) ONLY [“LEASE” OF IFQ/IPQ]

Enter the Permit Number, the Fishery Code, the Quota Type Code, the Regional Code, and the Quota Class associated with the Permit, and the number of pounds to be transferred.

Enter the requested information on the amount being paid for the IFQ/IPQ in the space provided.

BLOCK E1 – SURVEY QUESTIONS FOR TRANSFEROR (SELLER)

the information provided on this section of the Application for Transfer is used to analyze, and report on, BSAI Crab Rationalization Program performance. All information provided on this survey is confidential under the Privacy Act and will not be publicly released except as aggregated data such that the identity of the submitter can not be determined.

Complete the survey question; check all that apply. Provide an explanation if the proposed transfer is requested pursuant to a “hardship” (IFQ resulting from CVC or CPC QS) and/or if the proposed transfer is requested pursuant to some “other” reason.

Indicate whether a permit broker was used to facilitate this transfer; if so, enter the broker fees as either a “lump sum” (how much was paid to the Broker) or as a percentage of the total price of the Quota.

BLOCK E2 – SURVEY QUESTIONS FOR TRANSFEREE (BUYER)

The information provided on this section of the Application for Transfer is used to analyze, and report on, BSAI Crab Rationalization Program performance. All information provided on this survey is confidential under the Privacy Act and will not be publicly released except as aggregated data such that the identity of the submitter can not be determined.

1. Indicate whether the Quota to be transferred will be used as collateral for a loan.

If YES, identify the party with an interest in (“lien” against) the Quota.

RAM, as a courtesy, will enter the name of the party that has asserted an interest in the Quota on the Report of Quota Holdings that is provided to QS Holders; recording the asserted interest does not create a valid lien against the Quota, does not indicate that a valid lien exists; likewise, the absence of a recorded interest does not mean that no lien exists.

2. Indicate the major source of financing for the Quota; describe “Other” source of financing in the space provided.
3. Indicate how the Quota was located; i.e., how did the proposed transferee know that the Quota was available for


transfer?

4. Indicate the relationship, if any, between the proposed Transferor and the proposed Transferee; describe any “Other” relationship.

BLOCKS F1 AND F2 – SIGNATURE OF THE PROPOSED TRANSFEROR AND PROPOSED TRANSFEE

1 – 3. Complete the Signature Blocks as prompted on the Form.

Note that, to be considered, the application must bear original signatures of the Proposed Transferor and the Proposed Transferee (or their respective agents) and the signatures must be witnessed by a Notary Public.

<p style="text-align: center;">Application for Transfer of CRAB QS/IFQ to or from a Eligible Crab Community Organization (ECCO)</p>	<p>U.S. Dept. of Commerce/NOAA National Marine Fisheries Service Restricted Access Management (RAM) P.O. Box 21668 Juneau, AK 99802-1668</p> 
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BLOCK A - GENERAL REQUIREMENTS

- This form may only be used if an Eligible Crab Community Organization (ECCO) is the proposed transferor (“seller”) or the proposed transferee (“buyer”) of the Quota Share (QS) or Individual Fishing Quota (IFQ). If that is not the case, a different RAM form must be used.
- The party to whom an ECCO is seeking to transfer the QS/IFQ must hold a Transfer Eligibility Certificate (TEC) issued by RAM.
- If the ECCO is applying to permanently transfer QS, a representative of the community on whose behalf the QS is held must sign the application.
- Attach a copy of the terms of agreement for the transfer, the bill of sale for QS or PQS, or lease agreement for IFQ or IPQ. This application will not be approved until the Regional Administrator has reviewed and approved the transfer agreement signed by the parties to the transaction.
- If authorized representative represents either the transferor or transferee, proof of authorization to act on behalf of transferor or transferee must be attached to the application.
- An affirmation must be attached to this applicant that the individual receiving IFQ from an ECCO has been a permanent resident in the ECC for a period of 12 months prior to the submission of this application to or from an ECCO on whose behalf the ECCO holds QS.
- The ECCO applying to receive or transfer crab QS must submit verification that he/she submitted a completed annual report.
- Prior to approving a transfer, NMFS must be able to verify that the person applying to make or receive the QS, PQS, IFQ or IPQ transfer has submitted an EDR, if required, and paid all fees.

BLOCK B - TRANSFEROR (SELLER) INFORMATION

1. Name:	2. NMFS Person ID:	
3. Permanent Business Mailing Address:	4. Temporary Business Mailing Address (if applicable):	
5. Business Telephone Number:	6. Business Fax Number:	7. E-mail address:
8. Is transferor an ECCO? YES [<input type="checkbox"/>] NO [<input type="checkbox"/>] If YES, provide name of Community represented by the ECCO		
9. Name of Community:		

This application for transfer must be completed, signed, and notarized by both parties. Failure to have signatures properly notarized will result in delays in the processing of this application. Additionally, applications involving the permanent transfer of Processor QS (PQS) outside the community in which the processing facility resides must include a statement by an authorized representative of that community indicating that the community has been offered the right of first refusal on the sale of this PQS.

BLOCK G – CERTIFICATION OF TRANSFEROR	
<i>Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information presented here is true, correct, and complete</i>	
1. Signature of Transferor or Authorized Agent:	2. Date:
3. Printed Name Transferor or Authorized Agent Note: If completed by an agent, attach authorization:	
4. Notary Public Signature: ATTEST	5. Affix Notary Stamp or Seal Here:
6. Commission Expires:	

BLOCK H – CERTIFICATION OF TRANSFEREE	
<i>Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information presented here is true, correct, and complete.</i>	
1. Signature of Transferee or Authorized Agent:	2. Date:
3. Printed Name Transferee or Authorized Agent Note: If completed by an agent, attach authorization:	
4. Notary Public Signature: ATTEST	5. Affix Notary Stamp or Seal Here:
6. Commission Expires:	

BLOCK I – CERTIFICATION OF ECCO COMMUNITY REPRESENTATIVE

(Required only when ECCO proposes to permanently transfer Quota Share)

I am a duly authorized representative of the community (listed in Block C or Block D) on whose behalf the ECCO is proposing to transfer QS; by my signature below, I attest that the applicant ECCO has the approval of our community to complete this permanent QS transfer, for the reasons set out on this application.

1. Signature of Community Representative:	2. Date:
3. Printed Name and Title of Community Representative:	
4. Notary Public Signature: ATTEST	5. Affix Notary Stamp or Seal Here:
6. Commission Expires:	

PUBLIC REPORTING BURDEN STATEMENT

Public reporting for this collection of information is estimated to average 2 hours per response, including the time for reviewing the instructions, searching the existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Assistant Regional Administrator, Sustainable Fisheries Division, NOAA National Marine Fisheries Service, P.O. Box 21668, Juneau, AK 99802-1668.

ADDITIONAL INFORMATION

Before completing this form please note the following: 1) Notwithstanding any other provision of law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information, subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number; 2) This information is mandatory and is required to manage commercial fishing efforts under 50 CFR part 680, under section 402(a) of the Magnuson-Stevens Act (16 U.S.C. 1801, *et seq.*), and 16 U.S.C. 1862(j); 3) Responses to this information request are confidential under section 104(b) of the Magnuson-Stevens Act. They are also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics.

Instructions
APPLICATION TO TRANSFER QS/IFQ TO, OR FROM,
AN ELIGIBLE CRAB COMMUNITY ORGANIZATION (ECCO)

The Crab Individual Fishing Quota (IFQ) program is administered by the Restricted Access Management (RAM) Program of the Alaska Region, National Marine Fisheries Service (NMFS). Transfers of all Quota Share (QS) and its associated annual IFQ must be approved, in advance, by RAM.

In 2005 the Secretary of Commerce adopted the Crab IFQ program, this program provides that cities and boroughs may hold, and to fish, QS and IFQ. Such communities are represented by an Eligible Crab Community Organization (ECCO), who must use a special application form to provide for transfers of QS/IFQ to and from (and between) ECCOs. These instructions are designed to help you to use that special transfer application form. Some general rules pertain, as follows:

An application submitted and signed by an authorized representative for a party to the transfer will not be processed unless clear and unambiguous certification of the representative's authority to do so is provided.

- Please submit a **separate application** for each proposed QS or IFQ permit transfer.
- Please complete the **entire application, including all attachments**; failure to do so could result in delays in the processing of your application.
- Please submit an **original application** only -- a photocopy of an application, or an application submitted by facsimile will not be processed.
- Please ensure that signatures on the application are **original and are notarized**. RAM will not process an application that does not bear original signatures (fax'd applications will be returned); all signatures must be witnessed by a Notary Public (or, in some remote areas, the community Postmaster or Postmistress).
- Please allow at least **ten working days** for your application to be processed. Without exception, RAM processes applications in the order in which they are received.
- When completed, mail the original application to:

Alaska Region, National Marine Fisheries Service
Restricted Access Management (RAM)
P.O. Box 21668
Juneau, AK 99802-1668

OR

- When completed, deliver the original application to:

Alaska Region, National Marine Fisheries Service
Restricted Access Management (RAM)
Room 713, Federal Building
709 West 9th Street
Juneau, AK 99802-1668

- Items will be sent to you by first class mail, unless you provide alternate instructions and include a prepaid mailer with appropriate postage or corporate account number for express delivery.
- If you have any questions, or if you need any assistance in completing the application, please contact RAM as follows:

Telephone (toll Free):	1-800-304-4846 (press "2")
Telephone (Juneau):	907-586-7202
E-Mail Address:	RAM.Alaska@noaa.gov
Web Site:	www.alaskafisheries.noaa.gov/ram

BLOCK A – GENERAL REQUIREMENTS

This application is only to be used to apply for a transfer of Quota Share (QS) or Individual Fishing Quota (IFQ) to or from an Eligible Crab Community Organization (ECCO); if an ECCO is not a party to the proposed transfer, another application form should be used.

Note, as well, that any party to whom the QS/IFQ is proposed to be transferred must hold a Transfer Eligibility Certificate (TEC) and that, if the application is to permanently transfer QS from an ECCO to another party, the application must be signed by a representative of the community for whom the ECCO holds the QS.

BLOCK B – TRANSFEROR (SELLER) INFORMATION

1. Legibly (print or type) enter the name of the transferor; this should be the full name as it appears on the QS Certificate or the TEC
2. Enter the "NMFS Person ID" (as set out on the QS Certificate or the TEC).
3. Enter the permanent business mailing address including P.O. Box number or street, city, state, and zip code.
4. If appropriate, enter the temporary business mailing address (the address to which the transfer documentation should be sent, if different from the permanent address).
- 5-7. Enter business telephone number, business fax number, and E-mail address (if available).
8. If transferor is an ECCO, enter the name of the community on whose behalf the ECCO is applying.

BLOCK C – TRANSFEREE (BUYER) INFORMATION

1. Legibly print or type the name of the transferee; this should be the full name as it appears on the QS Certificate or the TEC.
2. Enter the "NMFS Person ID" (as set out on the QS Certificate or the TEC).
3. Enter the permanent business mailing address including P.O. Box number or street, city, state, and zip code.

4. If appropriate, enter the temporary business mailing address (the address to which the transfer documentation should be sent, if different from the permanent address).
- 5-7. Enter business telephone number, business fax number, and E-mail address (if available).
8. If the proposed transferee is an ECCO, enter the name of the community on whose behalf the ECCO is applying.

BLOCK D – IDENTIFICATION OF QS/IFQ TO BE TRANSFERRED

1. Enter the QS species and QS type.
2. Enter the number of QS or IFQ units to be transferred, the total QS units, number of IFQ pounds, and the range of serial numbers to be transferred (shown on the QS certificate).
3. If the transfer application is submitted on behalf of the community represented by the applicant ECCO, enter the name of the community.
4. Indicate (YES or NO) whether all remaining IFQ pounds for the current fishing year are to be transferred; if NO, specify the number of pounds to be transferred.

BLOCK E – TRANSFER OF IFQ ONLY ("LEASE" OF IFQ)

This block should only be completed if the ECCO is applying to transfer IFQ to a permanent resident of the community on whose behalf the ECCO holds the QS.

1. Identify the IFQ to be transferred by entering the IFQ Permit Number and Year
2. Enter the actual number of IFQ pounds to be transferred

BLOCK F – REQUIRED SUPPLEMENTAL INFORMATION

If the proposed transferor is an ECCO, indicate the reasons you are proposing this transfer (check all that apply).

BLOCK G – PRICE PAID FOR QS, PQS, AND/OR IFQ, IPQ (TRANSFEROR)

Indicate (YES or NO) whether a broker was used for this transaction

If YES, enter total price paid to the broker or calculate how much was paid as a percentage of the total price.

Enter total amount being paid for the QS/IFQ in this transaction, including all fees.

Price per unit of QS and the price per pound of IFQ

Indicate reasons (check all that apply) for transferring QS/IFQ

BLOCK H - METHOD OF FINANCING FOR THE QS, PQS AND/OR IFQ, IPQ (TRANSFEREE)

Indicate (YES or NO) whether the QS/IFQ being purchased will have a lien attached.

If YES, enter name of lien holder.

Indicate one primary source of financing for this transfer.

Indicate all that apply describing how the QS/IFQ was located.

Indicate the relationship, if any, between the transferor and the transferee.

Indicate (YES or NO) whether an agreement exists to return the QS or IFQ to the transferor or any other person, or with a condition placed on resale; if YES, explain.

Attach a copy of the terms of agreement for the transfer, the bill of sale for QS, or lease agreement for IFQ.

CERTIFICATION OF TRANSFEROR

Printed name and signature of transferor and date signed.

Signature of Notary Public, date commission expires, and notary seal or stamp.

CERTIFICATION OF TRANSFEREE

Printed name and signature of transferee and date signed.

Signature of Notary Public, date commission expires, and notary seal or stamp.

CERTIFICATION OF ECCO COMMUNITY REPRESENTATIVE

Printed name and signature of ECCO community representative and date signed.

Signature of Notary Public, date commission expires, and notary seal or stamp.