Revised: 02/01/2008 OMB Control No.: 0648-0272 Expiration Date: 04/30/2008



# APPLICATION FOR TRANSFER OF QS/IFQ

U.S. Dept. of Commerce/NOAA National Marine Fisheries Service (NMFS) Restricted Access Management (RAM) P.O. Box 21668 Juneau, AK 99802-1668 (800) 304-4846 toll free / 586-7202 in Juneau (907) 586-7354 fax



NOTE: A separate application must be submitted for each Quota Share (QS) or IFQ Transfer. If you want to do a self sweep-up, please use the self sweep-up form.

BLOCK A TEC						
Does the Transferee (Buyer) hold a Trans	fer Eligibility Certificate	(TEC)?	YES [ ] NO [ ]			
BLOCK B CHECKLIST						
USE THIS LIST TO ENSURE YOUR APPLICATION IS COMPLETE. INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED. NOTE: Faxed Applications Are Not Acceptable. Please Submit Originals.						
<ul> <li>Completed, signed, and notarized application</li> <li>Copy of signed &amp; notarized sales or gift agreement</li> <li>QS/IFQ Transfer: Seller's original QS Certificate</li> <li>Documentation for Authorized Agent (if applicable)</li> <li>Sweep Up Transfer: Buyer's and seller's original QS Certificate</li> </ul>						
[] Transfer of IFQ (Category "A" Sh	nares, Surviving Spouse l	Lease): Copy of per	mit or QS Certificate			
BLOCK C - TRANSFEROR (SELLER)						
1. Name: 2. NMFS Person ID:						
		3. Date of Birth:				
4. Permanent Business Mailing Address:		5. Temporary Business Mailing Address (see instructions):				
6. Business Telephone No.:	7. Business Fax No.:		8. E-mail address (if available):			

BLOCK D - TRANSFEREE (BUYER)						
1. Name:		2. NMFS Person II	2. NMFS Person ID:			
		3. Date of Birth:	3. Date of Birth:			
4. Permanent Business Mailing Address:		5. Temporary Busin	ness Mailing Address (see instructions):			
6. Business Telephone No.:	7. Business Fa	x No.:	8. E-mail address (if available):			
RLOCK E -	OUESTIONS	FOR TRANSFERE	E (RIIVER)			
1. Do you request that this QS be included in a						
2. If YES, list the identifier on the QS Certifica	ate into which thi	s new piece should be	combined			
(Example H-2C-B-B-123,456,789	through H-2C	C-B-B-123,458,789):				
Reminder: For Sweep Up, attach both the buyer's and seller's original QS Certificates to this application.						
3. If this is Catcher Vessel CDQ Compensation QS and the vessel category has never been declared, check the one Catcher Vessel						
Category in which you would like to have your	QS issued.					
Vessel Category: <b>D</b> [ ]	C [ ] B [ ]					
DIOCKE IDENTI	FICATION OF	E OS AND IFO TO	DE TDANGEEDDEN			
BLOCK F - IDENTIFICATION OF QS AND IFQ TO BE TRANSFERRED  Complete Block F if QS and IFQ are to be transferred together or if you want to transfer QS only.						
1. Halibut [ ] or Sablefish [ ] 2. IFQ Regulatory Area:						
3. Vessel Category: 4. Nu	4. Number of QS Units to be Transferred: 5. Transferor (Seller) IFQ Permit Number					
6. Numbered To and From (Serial Numbers are shown on the QS Certificate):						
7. Do you want all remaining pounds for the current fishing year transferred? Yes [ ] No [ ]						
If <b>no</b> , specify the number of pounds to be transferred:						
-Pounds transferred includes a pro-rata share of any overage based on the QS units held or transferred and is non-negotiable.						
-Pounds transferred includes a pro-rata share of any underage based on the QS held and transferred UNLESS OTHERWISE INSTRUCTED						

		BLOCK G - TRANSFER	ΩF	' I F	O ONI V	
Complete this Block		nt to Transfer IFQ Only (Applie				g Spouse IFQ)
1. Halibut [ ] or Sablefish	[ ]	2. IFQ Regulatory Area:			3. Number of U	Jnits:
4. Numbered To and From (Serial )	Numbers	are shown on the QS Certific	cate)	):		
5. Actual Number of IFQ Pounds:	of IFQ Pounds:  6. Transferor (Seller) IFQ Permit No.  7. Fishing Ye				ar: 20	
REQUIRED SUPPLEMENTAL INFORMATION YOUR APPLICATION WILL NOT BE PROCESSED UNLESS YOU PROVIDE THE FOLLOWING INFORMATION						
В	LOCK F	H - TO BE COMPLETED	BY	TE	HE TRANSFEROR	
1. Give the price per pound (inclu	ding leas	ses) \$/	#IF(	Q (	Price divided by IFQ pou	nds) Including fees
Give the price per unit of QS		\$/	Uni	t of	QS (Price divided by QS	S Units)
2. What is the <b>total amount</b> being	paid for	the QS/IFQ in this transaction	ı, in	clud	ling all fees?	
3. What are your reasons for trans	ferring tl	he QS/IFQ? (check all that ap	ply	.)		
Retirement from fisheries [ ] Shares too small to fish [ ] Consolidation of shares [ ]						
Pursue non-fishing activities [ ] Trading shares [ ] Other (explain) [ ]						
Health problems [ ] Enter other fisheries [ ]						
4. Is there a broker being used for	this trans	saction? [ ] Yes [ ] N	No			
If <b>yes</b> , how much is being paid in brokerage fees? \$ or % of total price.						
		- TO BE COMPLETED	BY	TH	IE TRANSFEREE	
1. Will the QS/IFQ being purchase	d have a	lien attached? [ ] Yes	[	]	No	
If yes, name of lien holder						
2. What is the primary source of fi	nancing	for this transfer (check one)?				
Personal resources (cash)	] .	AK Com. Fish & Ag. Bank	[	]	Received as a gift	[ ]
Private bank/credit union	] '	Transferor/seller	[	]	NMFS loan program	[ ]
Alaska Dept. Of Commerce	]	Processor/fishing company	[	]	Other (explain)	[ ]
3. How was the QS/IFQ located (c	heck all	that applies)?				
Relative	] .	Advertisement/public notice	[	]	Broker	[ ]
Personal friend	1	Other (explain)	[	1		

4. What is the Buyer's re	elationship to the <b>G</b>	QS/IFQ Holder (check	all that applies	y)?		
Unrelated	[ ]	Family member	[ ]	Business partner	[ ]	
Friend	[ ]	Other (explain)	[ ]			
5. Is there an agreement	to return the QS of	or IFQ to the Transfero	or (seller), or an	y other person, or a cond	dition placed on resale?	
	[ ] Yes	s [ ] No				
If <b>yes</b> , please explain:						
NOTE: This application notarized will result in de				d by both parties. Failu	re to have signatures properly	
		BLOCK J - TRA	· ·	<u> </u>		
Under penalties of perjuinformation presented h			oplication, and	to the best of my knowle	edge and belief, the	
Signature of Transferor (Seller) or Authorized Agent:				2. Date:		
3. Printed Name Transferor (Seller) or Authorized Agent <b>Note:</b> If this is completed by an agent, attach authorization:						
4. Notary Public Signature: ATTEST			5. Affix No	otary Stamp or Seal Here	):	
6. Commission Expires	:					
		BLOCK K - TRA	NSFEREE (	BUYER)		
Under penalties of pethe information prese				ion, and to the best of	my knowledge and belief,	
Signature Transfere	e (Buyer) or Auth	orized Agent:		2. Date:		
3. Printed Name Trans	sferee (Buyer) or A	Authorized Agent <b>Not</b>	e: If this is con	mpleted by an agent, atta	ch authorization:	
4. Notary Public Signa	ature:	ATTEST	5. Affix N	lotary Stamp or Seal Her	re:	
5. Commission Expire	s:					

# INSTRUCTIONS Application for Transfer of QS/IFQ

Submit a separate application for each Quota Share (QS) or Individual Fishing Quota (IFQ) Transfer. If you want to apply for a "self sweep-up," please use the Self Sweep-Up Form.

The original application must be submitted — an application sent by fax will **not** be processed.

When completed, mail the original application form to:

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

or deliver to:

### Room 713, Federal Building 709 West 9th Street

**Please allow at least ten working days for your application to be processed.** Items will be sent 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 need assistance in completing this application or need additional information, call Restricted Access Management at (800) 304-4846 (#2) or (907) 586-7202 (#2).

Note: It is important that all blocks are completed and all necessary documents are attached. Failure to answer any of the questions, provide attachments, or to have signatures notarized could result in delays in the processing of your application.

#### BLOCK A -- TEC

Any person that received QS/IFQ as an Initial Issuee or that holds a Transfer Eligibility Certificate (TEC) is eligible to receive QS/IFQ by transfer. If you answer "No," the transferee (buyer) will need to contact RAM for instructions on eligibility procedures and a TEC application form.

#### BLOCK B -- CHECKLIST

Use this list as a guide to make sure you have included all the necessary items in the mailing of your application. This will ensure timely processing of your transfer application. If you have lost your original QS certificate, you will need to complete an Application for Replacement of Certificates, Cards, or Permits.

#### BLOCK C -- TRANSFEROR (SELLER)

- 1. Name: Full name as it appears on QS Certificate and/or TEC.
- 2. <u>NMFS Person ID</u>: As found on QS Certificate or TEC.
- 3. <u>Permanent Business Mailing Address</u>: Include street or P.O. Box number, city, state, and zip code.
- 4. <u>Temporary Business Mailing Address</u>: Address you want the transfer documentation sent if somewhere other than to the permanent address. Include street or P.O. Box number, city, state, and zip code.
- 5-7. Business Telephone No., Business Fax No., and Business e-mail address (if available): Include the area codes.

#### **BLOCK D -- TRANSFEREE (BUYER)**

- 1. <u>Name</u>: Full name as it appears on QS Certificate and/or TEC.
- 2. <u>NMFS Person ID</u>: As found on QS Certificate or TEC.
- 3. <u>Permanent Business Mailing Address</u>: Include street or P.O. Box number, city, state, and zip code.
- 4. <u>Temporary Business Mailing Address</u>: Address you want the transfer documentation sent if somewhere other than to the permanent address. Include street or P.O. Box number, city, state, and zip code.
- 5-7. Business Telephone No., Business Fax No., and Business e-mail address (if available): Include the area codes.

#### **BLOCK E - QUESTIONS FOR TRANSFEREE (BUYER)**

1. Indicate if you wish to combine ("sweep up") the transferred block together with a block you already hold. Blocked QS's may be swept up into one block if the total amount of QS being combined is less than or equal to the following amounts of QS units per area.

Halibut		Sablefish			
<u>Area</u>	<u>Units</u>	<u>Area</u>	<u>Units</u>		
2C	19,992	SE	33,270		
3A	27,912	WY	43,390		
3B	22,947	CG	46,055		
4A	22,947	WG	48,410		
4B	15,087	AI	99,210		
4C	30,930	BS	91,275		
4D	26,082				

- 2. Starting and ending serial numbers to be swept up.
- 3. If this is a transfer of Catcher Vessel CDQ compensation QS, there is a **one time** opportunity at the time of the first transfer to **permanently** designate the catcher vessel category of the QS being transferred.

#### BLOCK F - IDENTIFICATION OF QS AND IFQ TO BE TRANSFERRED

This block should only be completed if you are transferring QS and the IFQ resulting from these shares. Persons wishing to transfer IFQ only (Category "A" shares, lease), should fill out Block G.

- 1. Species: halibut or sablefish.
- 2. IFQ Regulatory Area.
- 3. Vessel Category.
- 4. Number of units to be transferred.
- 5. Transferor (seller) IFQ permit number.
- 6. Starting and ending serial number of shares to be transferred [For example, H-2C-C-B-123,456 THROUGH H-2C-C-B-789,493]
- 7. A **specific number of pounds** must be indicated for each transfer. A pro-rata amount of IFQ (**overage pounds**) will be debited from any IFQ transferred based on the QS unit held or transferred. The current QS holder may retain **underage pounds**. However, unless otherwise specified, the underage associated with the QS will be transferred. Please indicate your specific intention.

#### BLOCK G - TRANSFER OF IFQ ONLY

This box should be completed if IFQ pounds only are being transferred (leased) and the QS will remain with the current holder of those shares. Only Category "A" or those shares received as a Surviving Spouse under the provisions in 50 CFR 679 may be transferred in this manner.

- 1. Species: halibut or sablefish.
- 2. IFQ Regulatory Area.
- 3 Number of units to be transferred.
- 4. Starting serial number of shares to be transferred to the ending serial number of shares to be transferred.
- 5. Specific number of pounds being transferred.
- 6. Transferor's (seller's) IFQ permit number.
- 7. The fishing year is the current year or year in which IFQ should be transferred. A transfer of IFQ only cannot be completed until the IFQ has been awarded for that year.

## BLOCK H - REQUIRED SUPPLEMENTAL INFORMATION (Completed by Transferor)

- 1. The price per pound of IFQ must be entered, including IFQs **only** "leased". (To derive the number of dollars per unit of QS or pound of IFQ, divide the total amount paid, including fees, by the number of QS units <u>or</u> the number of IFQ pounds being transferred.)
- 2. The total amount entered should include **any and all** monies collected on behalf of the seller for the shares involved, including any fees that will be paid out to other parties for the expenses of brokering or assisting in the sale of these shares.

- 3. Please check all boxes that apply to this transaction.
- 4. Are you paying a third party to assist with this transaction? If **No**, go to question #2. If **Yes**, put the total price paid to the broker or calculate how much was paid to the third party as a percentage of the total sale price. (The percentage can be derived by using this formula: divide the brokerage fee by the total price paid for the QS/IFQ, then multiply the result by 100.)

### BLOCK I - REQUIRED SUPPLEMENTAL INFORMATION (Completed by Transferee)

- 1. Indicate if the QS will be used as collateral. List the name of entity or person(s) who will hold the Security interest lien. This name will appear on the QS Certificate.
- 2-4. Please check any and all boxes that apply to this transaction.
- 5. Regulations governing the IFQ program do not permit transfer of QS subject to any conditions of repossession or resale to the transferor except by court order, operation of law, or security agreement.

#### BLOCKS J & K CERTIFICATION OF TRANSFEROR, TRANSFEREE, AND NOTARY PUBLIC

- 1. Sign and print your name and date the application in the presence of a Notary Public. Application forms submitted to RAM must bear the **original signatures** of the parties **RAM will not process faxed applications**.
- 2. Representatives signing for a Transferor or Transferee must submit proof of authorization to submit this application on their behalf.
- 3. A Notary Public must Attest and affix Notary Stamp. The Notary Public cannot be the person(s) submitting this application.

#### PUBLIC REPORTING BURDEN STATEMENT

Public reporting for this collection of information is estimated to average 2.0 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 679 and under section 402(a) of the Magnuson-Stevens Act (16 U.S.C. 1801, *et seq.*); 3) Responses to this information request are confidential under section 104(b) of the Magnuson-Stevens Act as amended in 2006. They are also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics.