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TRAWL IDENTIFICATION OF OWNERSHIP INTEREST

UNITED STATES DEPARTMENT OF COMMERCE National Oceanic and Atmospheric Administration National Marine Fisheries Service, Northwest Region *Fisheries Permits Office* 7600 Sand Point Way NE, Bldg. 1 Seattle, WA 98115-0070

Phone (206) 526-4353 Fax (206) 526-4461

PACIFIC COAST GROUNDFISH

INSTRUCTIONS

The purpose of this form is to provide NOAA Fisheries with baseline information on participants in the trawl groundfish fishery to prepare for implementation of a future trawl rationalization program. Receipt of this form does not guarantee that you will qualify for an initial allocation of quota share.

IMPORTANT! This form should be submitted by the following:

- 1) Current owners of each limited entry permit endorsed for trawl gear;
- 2) Current owners of each vessel registered to a limited entry permit endorsed for trawl gear if not identical to the permit owner in number 1 above;
- 3) Current owners of Pacific whiting vessel licenses (if the vessel is not also associated with a permit listed in numbers 1 or 2 above); and
- 4) First receivers issued Pacific whiting first receiver exempted fishing permits (EFPs) during the 2009 Pacific whiting shoreside fishery. Pacific whiting shoreside first receivers means persons who receive, purchase, or take custody, control, or possession of Pacific whiting onshore directly from a Pacific whiting shoreside vessel.

A form should be filled out for each permit, vessel, EFP, or whiting license for which you have an ownership interest. Failure to complete this form may result in you not receiving an initial allocation of quota share. Please type or print legibly in ink. Attach additional sheets as necessary. Sign in ink, have your signature notarized, keep a copy for your records and mail the completed form to the address listed above.

SECTION A - PERMIT/VESSEL/PROCESSOR OWNER IDENTIFICATION

This section is pre-filled using information from NOAA Fisheries records. Please verify that the information included is correct and make any necessary corrections by crossing out and filling in correct data on the form.

- Field 1. Check all boxes that apply: If the permit owner and vessel owner are identical, check both boxes. If there are any differences among the permit or vessel owners, then a new form needs to be completed for each. If you are a Pacific whiting shoreside first receiver, check that box.
- Fields 2-4. Permit Number/Vessel Name/Vessel Registration Number: As applicable, list the Federal groundfish limited entry permit number, the name of the vessel registered to the permit and the U.S. Coast Guard documentation or state vessel registration number.
- Fields 5-6. Name/TIN/DOB: Enter the name of the business entity or individual that owns the permit, vessel, or first receiver. If a business entity, list their tax identification number (TIN). If

an individual, list their date of birth (DOB) using the format of mm/dd/yyyy.

- Field 7. State Registered: If a business entity is listed in Field 5, list the state where that entity was established and is currently recognized as active.
- Field 8. Business Mailing Address: Enter the business mailing address, including street or PO Box number, state, and zip code, where the item(s) should be sent. Also list a physical address for first receivers, if different from mailing address.
- Fields 9-11. Business Phone, Fax and Email: List the business telephone and fax numbers including the area codes; the fax number and email are optional.

SECTION B - IDENTIFICATION OF SHAREHOLDERS AND PARTNERS

This section is partially pre-filled using the business entity name(s) from Section A. The intent of Section B (Parts 1 and 2) is to identify all of the individuals who control the business and their percent of ownership interest. [Note: Only <u>ownership interest for shareholders with greater than or equal to 2% ownership interest in the business entity must be reported.]</u>

Part 1 - first level

Part 1 will be pre-filled with the business entities or individuals listed in Section A. List the TIN for business entities and the DOB for individuals. List the mailing address (if different than Section A), and the % ownership interest in the permit, vessel, or processor as listed in Section A. If there is only one individual listed, then the percent ownership interest held should equal 100%. If one business entity is listed, then the percent of the individual and the percent of the business entity. (see examples below)

Part 2 - second level

If the information from Part 1 hasn't gotten down to the individual level and still includes business entities, then Part 2 should be completed. Part 2 will be pre-filled with any business entity names from Part 1. List the individual names of all shareholders/partners of the business entity with greater than or equal to 2% ownership interest. The DOB is required for each individual as an additional means of identification. List each individual's business mailing address and the percent ownership interest they hold in the business entity. The individual(s) listed under each business should equal 100%, except for cases where some shareholders/partners in the business entity own less than 2% and are, therefore, not listed on this form. Information should be provided down to the individual level. If necessary, attach an additional sheet of paper. (see examples below).



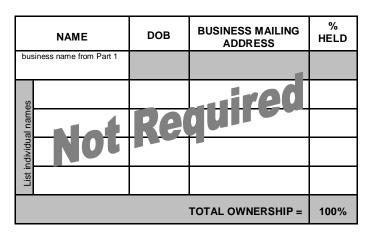
<u>A business entity established under the laws of the United States or any State must submit proof that it is so</u> <u>established and verify that it is an active corporation.</u> NOAA Fisheries may request further documentation as proof of ownership, including percentage of ownership. Note the Privacy Act Statement at the end of the form.

Example A: jointly named owners on permit, two individuals

Part 1

NAME	TIN/DOB	BUSINESS MAILING ADDRESS	% HELD
Ahab, Captain R	05/15/1959	1234 Petrale St, Astoria, OR 54321	75
Starbuck, Jim T	10/23/1963	PO Box 555, Newport, OR 54123	25
TOTAL OWNERSHIP = 1			100%

Part 2



Example B: jointly named owners on permit , an individual and a business

Part 1

NAME	TIN/DOB	BUSINESS MAILING ADDRESS	% HELD
Dragger, Joe A	05/15/1959	3 Dover Lane Astoria, OR 54321	50%
Trawlers, Inc.	91-1234567	PO Box 70, Newport, OR 54123	50%
TOTAL OWNERSHIP = 100%			100%

NAME		DOB	BUSINESS MAILING ADDRESS	% HELD	
business name from Part 1					
-	Frawlers, Inc.				
	Ahab, Captain R	05/15/1959	1234 Petrale St, Astoria, OR 54321	55%	
ames	Starbuck, Jim T	10/23/1963	PO Box 555, Newport, OR 54123	30%	
List individual n	Ishmael, Mark S	03/07/1965	8 White Whale Dr. Newport, OR 54123	10%	
List in	Queequeg, Warren G	07/23/1968	13 Wildside Blvd. Astoria, OR 54321	5%	
	TOTAL OWNERSHIP of Business 1 = 100%				

Example C: jointly named owners on permit , two businesses

Part 1

NAME	TIN/DOB	BUSINESS MAILING ADDRESS	% HELD
Trawlers, Inc.	91-1234567	PO Box 70, Newport, OR 54123	30%
Big Boat, LLC	71-7654321	4 Ever Whiting Astoria, OR 54321	70%
TOTAL OWNERSHIP =			100%

Part 2

NAME		DOB	BUSINESS MAILING ADDRESS	% HELD
business name from Part 1				
-	Frawlers, Inc.			
	Ahab, Captain R	05/15/1959	1234 Petrale St, Astoria, OR 54321	55%
ames	Starbuck, Jim T	10/23/1963	PO Box 555, Newport, OR 54123	30%
List individual names	Ishmael, Mark S	03/07/1965	8 White Whale Dr. Newport, OR 54123	10%
List ind	Queequeg, Warren G	07/23/1968	13 Wildside Blvd. Astoria, OR 54321	5%
	т	OTAL OWNER	SHIP of Business 1 =	100%
business name from Part 1 Big Boat, LLC				
es	Hake, Fred C	06/03/1950	4 Ever Whiting Astoria, OR 54321	33 ^{1/3} %
List individual names	Hake, Brenda K	08/30/1954	4 Ever Whiting Astoria, OR 54321	33 ^{1/3} %
st individ	Hake, Jr., Fred J 11/23/1975		12 Ever Whiting Astoria, OR 54321	33 ^{1/3} %
Lis				
TOTAL OWNERSHIP of Business 2 =				

SECTION C – SMALL BUSINESS CERTIFICATION

Read the criteria to determine if you are a small business according to the criteria listed. Check the appropriate box, yes or no.

SECTION D - CERTIFICATION OF APPLICANT AND NOTARY

The authorized agent must sign and date the form in the presence of a notary to certify that the individual(s) signing the form have satisfactorily identified themselves. By signing and dating the form, the authorized agent certifies that all information set forth in the form is true, correct, and complete to the best of the applicant's knowledge and belief. The form will not be considered without the authorized agent's signature. If a single individual is listed in Field 5 above, then that individual must sign. If two individuals are listed in Field 5 above, then the individual and a business entity are listed in Field 5 above, then the individual and the authorized agent for the business entity must both sign.

The notary must sign and date this section, and affix notary stamp or seal.



The authorized agent must include a copy of the corporate resolution or other authorizing document allowing the authorized agent to sign and certify on behalf of the business entity.

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SECTION A – PERMIT/VESSEL/FIRST RECEIVER OWNER IDENTIFICATION

1. Are you a:

Permit Owner

Uvessel Owner Decific Whiting First Receiver

2. Permit Number GF				4. USCG Doc or State Reg	jistration Number
5. Name				6. TIN or DOB	
				7. State Registered, if busi	ness entity
8. Business Mailing Address (also list physical address for first receiver, if different) 9. Business Phone					
Street or PO Box				10. Business Fax (<i>optiona</i>	0
City	State		Zip Code	11. Business Email (<i>optional</i>)	
SECTION		TION OF SHARI RT 1 – first		AND PARTNERS	
NAME (Last, First, Middle Initial)	TIN or DOB		INESS MAILIN r PO Box, City,	G ADDRESS State, Zip Code)	% INTEREST HELD
					1
		1	т	OTAL OWNERSHIP =	100%

SECTION B - IDENTIFICATION OF SHAREHOLDERS AND PARTNERS PART 2 – second level

NOTE: Owners of a business entity from Part 1 above must be listed down to the level of individual persons that make up that business. If more than one business is listed, be clear which individuals belong to which business.

If necessary, attach an additional sheet of paper with the information required below.

	NAME (Last, First, Middle Initial)	DOB (mm/dd/yyyy)	BUSINESS MAILING ADDRESS (Street or PO Box, City, State, Zip Code)	% INTEREST HELD (IN BUSINESS)
busi	ness name from Part 1			
S				
ual name				
list individual names				
			TOTAL OWNERSHIP of Business 1 =	100%
busi	ness name from Part 1			
0				
list individual names				
t individu				
<u>sil</u>				
			TOTAL OWNERSHIP of Business 2 =	100%
busi	ness name from Part 1			
al names				
list individual names				
lis				
		1	TOTAL OWNERSHIP of Business 3 =	100%

SECTION C – SMALL BUSINESS CERTIFICATION				
Are you a small business according to the standards outlined below? <u>Small businesses</u> . The Small Business Administration has established size criteria for all major industry sectors in the US, including fish harvesting and fish processing businesses. A business involved in fish harvesting is a small business if it is independently owned and operated and not dominant in its field of operation (including its affiliates) and if it has combined annual receipts not in excess of \$4.0 million for all its affiliated operations worldwide. A seafood processor is a small business if it is independently owned and operated, not dominant in its field of operation, and employs				
500 or fewer persons on a full time, part time, temporary, or other basis, at all its affiliated operations worldwide. A business involved in both the harvesting and processing of seafood products is a small business if it meets the \$4.0 million criterion for fish harvesting operations. A wholesale business servicing the fishing industry is a small business if it employs 100 or fewer persons on a full time, part time, temporary, or other basis, at all its affiliated operations worldwide. For marinas and charter/party boats, a small business is one with annual receipts not in excess of \$7.0 million.				
<u>Small organizations</u> . The Regulatory Flexibility Act defines "small organizations" as any nonprofit enterprise that is independently owned and operated and is not dominant in its field. <u>Small governmental jurisdictions</u> . The Regulatory Flexibility Act defines small governmental jurisdictions as governments of cities, counties, towns, townships, villages, school districts, or special districts with populations of less than 50,000.				
SECTION D - CERTIFICATION OF APPLICANT AND NOTARY This section must be completed by a notary to certify that the individual(s) have satisfactorily identified themselves.				
Under penalties of perjury, I hereby declare that I, the undersigned, completed this form, and the information contained herein is true, correct, and complete to the best of my knowledge and belief.				
Signature of Authorized Representative	Date			
Printed Name of Authorized Representative (NOTE: attach authorization, if needed)				
Notary Public Signature	Affix Notary Stamp or Seal Here			
Date Commission Expires				

WARNING STATEMENT: A false statement on this form is punishable by permit sanctions (revocation, suspension, or modification) under 15 CFR 904, a civil penalty of up to \$140,000 under 16 USC 1858, and/or criminal penalties including, but not limited to, fines or imprisonment or both under 18 USC 1001.

PRIVACY ACT STATEMENT: Your DOB and/or TIN are confidential and protected under the Privacy Act. Provision of your DOB or TIN is mandatory as part of this collection. The primary purpose for requiring the DOB and/or TIN is to verify the identity of individuals/entities doing business with the government to provide a unique identification for assistance to comply with the Debt Collection Improvement Act of 1996 (Public Law 104-134) and for enforcement activities. The information collected is part of a Privacy Act System of Records, COMMERCE/NOAA #19, Permits and Registration for United States Federally Regulated Fisheries. A notice was published in the Federal Register on April 17, 2008 (73 FR 20914) and became effective on June 11, 2008 (73 FR 33065).

PRA STATEMENT: Public reporting burden for this collection of information is estimated to average 0.5 hours per response, including the time for reviewing the instructions, searching 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 NOAA/National Marine Fisheries Service, Northwest Region, Attn: Assistant Regional Administrator, Sustainable Fisheries Division, 7600 Sand Point Way NE, Seattle, WA 98115. Some of the information collection described above is confidential under section 402(b) of the Magnuson-Stevens Act and under NOAA Administrative Order 2166 100, Protection of Confidential Fisheries Statistics. Phone number, fax, email, TIN, and DOB are not released to the public. The names of individuals who have an ownership interest in an entity that owns a permit, vessel or processing plant and the actual percentage of ownership are considered business confidential and are not released to the public.