

**FIRST RECEIVER SITE
LICENSE RENEWAL FORM
PACIFIC COAST GROUND FISH
Limited Entry Permit**

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
www.nwr.noaa.gov

Please make any changes as appropriate to the addresses, phone and fax number and email address listed below.
Please sign, date and return the form with payment.

License Number:

License Holder:

License Holder name(s):

Business Address:

City:

State:

Zip Code:

Business Phone:

Fax Number:

Email address:

Physical Site Location of IFQ Offload **Check here if address is same as given above**

If different from license holder, please provide below

Business address (street address only)

City:

State:

Zip

Code:

Business Phone:

Fax Number:

Email address:

Name of Plant Contact if different from license holder:

Please sign below to certify that the above information is true, correct and complete (edit if necessary) to the best of your knowledge and return this form with a check or money order for \$XXXX made payable to **U.S. Department of Commerce, NOAA**. Mail to: NOAA/NMFS/Northwest Region, Sustainable Fisheries Division, 7600 Sand Point Way NE, Bldg. #1 Seattle, WA 98115-0070.

Signature of owner(s)

Title (If corporate officer)

Date

Print Name of Signatory: _____

Warning Statement: A false statement on this form is punishable by permit sanctions (revocation, suspension, or modification) under 15 CFR Part 904, a civil penalty up to \$100,000 under 16 USC 1858, and as a federal crime under 18 USC 1001

PRIVACY ACT STATEMENT: Phone number, fax and email information are not released to the public. The permit sale/lease information and the amount of sablefish landed to date given on a transfer form are considered confidential. Similarly, the names associated with an entity that owns a sablefish permit or has vessel registered to sablefish endorsed permit are confidential, as are date of birth for an individual and any medical records provided to obtain an exemption from the owner on board required. The information collected is part of a Privacy Act System of Records, COMMERCE/NOAA #19, Permits and Registrations 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 0.33 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. It is also confidential under NOAA Administrative Order 216-100, Protection of Confidential Fisheries Statistics. Phone number, fax and email information are not released to the public.

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INSTRUCTIONS

This form must be completed and submitted to the National Marine Fisheries Service (NMFS) at the address to apply for a first receiver site license. A first receiver site license authorizes a first receiver to receive, purchase, or take custody or control of an IFQ landing at the physical location of the facility given on the license. This license is effective upon approval by NMFS.

Section A – First Receiver Information

The applicant must provide the name of the first receiver as given on the state buyer's license, the state in which the buyer's license was issued and the buyer license number. The buyer's license must be issued by the state in which the receiving facility is located as given in Section B. A copy of the state buyer's license must be included with the application. Provide the tax identification number if the first receiver is a business entity or date of birth if an individual. The applicant must provide the first receiver's business address, phone number, fax number (optional) and email address. Please provide the name of contact person if the first receiver is a business entity and phone number if different from that given for the first receiver business entity.

Section B – Physical Location of Receiving Facility

The applicant must provide the name of the legal owner of the landing facility where the IFQ landings will occur, the owner's tax identification number, the physical location of the receiving facility (street address only), city, state and zip code. The applicant must provide a phone number, fax number and email address (optional) and the name of the receiving facility's manager. If the first receiver intends to receive IFQ landings at multiple sites, please append the application and provide all information requested in Section B for these receiving facilities. A separate catch monitor plan must be provided for each unique receiving facility.

Section C - Certification of Applicant and Notary:

The applicant or authorized representative 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 applicant or authorized representative 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 representative's signature. The notary must sign and date this section, and affix notary stamp or seal



If the applicant is business entity, the authorized representative must include a copy of the corporate resolution or other document authorizing the individual to sign and certify on behalf of the business entity.

Supplemental Documentation

The applicant must provide a **catch monitor plan** for the site given in Section B that provides all of the information provided in template (see attached outline).

The applicant must provide a copy of their **state buyer's license** in the state where the receiving facility is located.

FIRST RECEIVER SITE LICENSE APPLICATION

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SECTION A – APPLICANT/FIRST RECEIVER INFORMATION

	1. State of Buyer License	2. Buyer License #
3. First Receiver Name	4. TIN or DOB	
	6. State Registered in, if business entity	
7. Business Mailing Address <i>Street or PO Box</i>	8. Business Phone ()	
	9. Business Fax (optional) ()	
<i>City</i>	<i>State</i>	<i>Zip Code</i>
10. Business Email (optional)		
First Receiver Contact Person/Name:		Business Phone ()

SECTION B – RECEIVING FACILITY INFORMATION (PHYSICAL LOCATION OF IFQ LANDING)

1. Name of Owner of the Receiving Facility	TIN	
2. Street Address (No P.O. box numbers)		
3. City	4. State	5. Zip Code
6. Fax ()	7. Phone ()	8. E-mail
9. Plan Manager/Point of Contact at receiving facility		

[Type text]

SECTION C - 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, am authorized to certify this application on behalf of the applicant and 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

ATTEST

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).

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