



**APPLICATION FOR AN  
INCENTIVE PLAN AGREEMENT (IPA) AND  
LIST OF IPA PARTICIPANTS**

U.S. Dept. of Commerce/NOAA  
National Marine Fisheries Service (NMFS)  
Sustainable Fisheries Division  
P.O. Box 21668  
Juneau, AK 99802-1668  
Fax: 907-586-7131  
Telephone: 907-586-7228

***TYPE OF APPLICATION***

Indicate whether this application is for

- New IPA       Amended IPA       Change IPA Participant List

NOTE: Attach Incentive Plan Agreement.

***BLOCK A – IPA INFORMATION***

- |                 |                |
|-----------------|----------------|
| 1. Name of IPA: | 2. IPA Number: |
|-----------------|----------------|

***BLOCK B – IPA CONTACT INFORMATION***

- |  |   |                    |
|--|---|--------------------|
| 1. Name of IPA’s Representative:       | 2. Name of Agent for Service of Process, if different from representative |                    |
| 3. Permanent Business Mailing Address: | 4. Temporary Business Mailing Address (if applicable):                    |                    |
| 5. Business Telephone No.:             | 6. Business Fax No.:  | 7. E-mail address: |

***BLOCK C – AFFIRMATION***

(Check if Applicable)

I claim, swear, and affirm that each eligible vessel owner or CDQ group, from whom I received written notification, requesting to join this IPA has been allowed to join this IPA subject to the same terms and conditions that have been agreed on by, and are applicable to, all other parties to the IPA.

***BLOCK D – CERTIFICATION***

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. Printed Name of Representative: | 2. Signature of Representative: | 3. Date Signed: |
|------------------------------------|---------------------------------|-----------------|

***BLOCK E – VESSEL IDENTIFICATION***

Attach additional sheet if necessary.

Name of vessel	ADF&G No.	Federal Fisheries Permit No.

**Instructions**  
**APPLICATION FOR AN**  
**INCENTIVE PLAN AGREEMENT (IPA) AND**  
**LIST OF IPA PARTICIPANTS**

**GENERAL INFORMATION**

For a new IPA, this application and the IPA must be received by NMFS by **October 1** prior to the year in which the IPA is proposed to be effective. Once approved, an IPA is effective starting January 1, unless the IPA is approved between January 1 and January 19, in which case the IPA is effective starting in the year in which it is approved.

Once approved, an IPA is effective until December 31 of the first year in which it is effective or until December 31 of the year in which the IPA representative notifies NMFS in writing that the IPA is no longer in effect, whichever is later. An IPA may not expire mid-year.

To amend an approved IPA, with no change in the IPA participants, the IPA representative must submit an application and an amended IPA to NMFS. An IPA may be amended at any time. The amended IPA is effective upon written notification of approval by NMFS to the IPA representative.

No party may join or leave an IPA once it is approved without changing the list of IPA participants. To change the list of IPA participants, this application must be received by NMFS by **December 1**.

**Additionally**

- ◆ Retain a copy of completed application for your records.
- ◆ NOTE: Attach Incentive Plan Agreement (IPA).
- ◆ Submit the completed application online at:

**Website:** <http://www.alaskafisheries.noaa.gov>

- ◆ If you have any questions, or if you need any assistance in completing the application, please call NMFS Sustainable Fisheries at **907-586-7228**.

**COMPLETING THE APPLICATION**

Submit the following information on this form:

**TYPE OF APPLICATION**

Indicate whether this application is for a new IPA, an amended IPA, or is a change to the IPA Participant List

**BLOCK A – IPA INFORMATION**

- 1-2 . IPA Name and Number. A name assigned by the IPA that describes the IPA or the group of American Fisheries Act (AFA) participants submitting the IPA. This name, together with an IPA number assigned by NMFS, must be used by the IPA Representative in all submissions of information about the IPA after it is approved by NMFS.

**BLOCK B – IPA CONTACT INFORMATION**

1. Name of IPA’s Representative
2. Name of Agent for Service of Process, if different from representative
3. Permanent Business Mailing Address:
4. Temporary Business Mailing Address (if applicable):
- 5-7. Business Telephone Number, Business Fax Number, and Business E-mail address

**BLOCK C – AFFIRMATION**

Check (Y) this box if applicable

**BLOCK D – CERTIFICATION**

Enter the printed name and signature of the Representative, and date signed.

**BLOCK E – VESSEL IDENTIFICATION**

(Attach additional sheet if necessary.)

List the name, Alaska Department of Fish and Game (ADF&G) vessel registration number, and Federal Fisheries Permit (FFP) number of the AFA catcher vessels, AFA catcher/processors, AFA motherships, and vessels fishing on behalf of the CDQ group that are governed by the IPA.

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***PUBLIC REPORTING BURDEN STATEMENT***

Public reporting burden for this collection-of-information is estimated to average 40 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 the 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.*) as amended in 2006; 3) Responses to this information request are confidential under section 402(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.

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