



**QUOTA SHARE (QS) HOLDER:  
IDENTIFICATION OF  
OWNERSHIP INTEREST**

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



**BLOCK A -- IDENTIFICATION OF QUOTA SHARE HOLDER**

1. Name of QS holder: \_\_\_\_\_

2. Is this business a publicly held corporation?  YES  NO  
**If YES, proceed to Block C.**

3. Is this a corporation, association, partnership or other non-individual entity?  YES  NO  
**If YES, is this entity still active?**  YES  NO

4. Is this an estate that has been probated?  YES  NO  
**If YES, on what date was probate finalized:** \_\_\_\_\_

**BLOCK B - - IDENTIFICATION OF MEMBERS  
SHAREHOLDERS, PARTNERS, JOINT VENTURERS, SUCCESSORS-IN-INTEREST**

NOTE: if ownership consists of separate/additional corporations or partnerships the individual owners of those entities and the percentage of interest those individuals hold in their respective corporations or partnerships must also be listed.

Name of Owner(s)	% Interest Held

Do these ownership percentages represent the addition of any new owners since QS was initially issued?  
 YES  NO

**TOTAL OWNERSHIP:**

**100 %**

**BLOCK C – CERTIFICATION**

*Under penalty of perjury, I declare that I have examined this form, and to the best of my knowledge and belief, the information I have presented here is true, correct, and complete.*

1. Signature	2. Date
3. Printed Name	4. Title
5. Signature of Notary Public	6. Affix Notary Stamp or Seal Below
7. Commission Expires:	

---

**PUBLIC REPORTING BURDEN STATEMENT**

Public reporting burden for this collection of information is estimated to average 2 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 Assistant Regional Administrator, Sustainable Fisheries Division, NMFS, Alaska Region, P.O. Box 21668, Juneau, AK 99802.

**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 402(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.

---

## INSTRUCTIONS

### QS HOLDER: IDENTIFICATION OF OWNERSHIP INTEREST

This form must be submitted by corporations, partnerships, associations, and other non-individual entities that hold quota share (QS) under the Pacific halibut and sablefish Individual Fishing Quota (IFQ) Program (50 CFR part 679). The information requested herein is needed by RAM to determine compliance with IFQ program requirements, including:

◆ **Limitations On Use of QS and IFQ.**

This information is needed to determine if persons who hold QS have exceeded their allowable use limits under the “individually and collectively” language set out in the IFQ regulations at 50 CFR 679.42(e) and (f); and,

◆ **Changes in corporations or partnerships.**

This information is also needed to determine if a corporation or partnership that holds catcher vessel QS has changed (i.e., the addition of a new member).

An entity must notify NMFS of any change within 15 days of its effective date and must then transfer its QS to a qualified individual.

◆ **Identify first-time applicants.**

◆ **Affirm an entity’s continuing existence.**

◆ **Ensure corporations and partnerships are not erroneously issued annual IFQ** resulting from the collectively held QS.

◆ **Indirect ownership of vessels** for purposes of the hired master provisions of the IFQ program.

### ***GENERAL INFORMATION***

Please type or print legibly in ink. You may photocopy and attach additional sheets as necessary. Please sign in ink, have your signature notarized, and retain a copy for your records.

When completed, submit the original application:

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

by delivery to: **Room 713, Federal Building  
709 West 9th Street  
Juneau, AK**

Items will be sent to you 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, as follows:

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

**Telephone (toll free): 800-304-4846 (press “2”)**

QS Holder:

Identification of Ownership Interest

Page 3 of 4

Telephone (in Juneau): 907-586-7202 (press "2")

e-Mail: [RAM.Alaska@noaa.gov](mailto:RAM.Alaska@noaa.gov)

### ***COMPLETING THE APPLICATION***

#### **BLOCK A - IDENTIFICATION OF QS HOLDER**

1. Provide name of QS holder.
2. Indicate whether the QS Holder is a publicly held corporation.  
**If YES**, sign the certification in Block C and return the form to RAM.
3. Indicate whether the QS Holder is a corporation, association, partnership, or other non-individual entity.  
**If YES**, indicate whether the entity is still active; **If YES**, go to Block B.  
**If NO**, sign the certification in Block C and return the form to RAM.
4. Indicate whether the QS Holder is an estate that has been probated.

You must answer YES if the non-individual QS Holder is an estate and all estate matters with regard to the disposition of the assets, including QS, have been finalized.

Provide the date the estate was settled.

#### **BLOCK B - IDENTIFICATION OF MEMBERS**

1. If ownership consists of separate or additional shareholders, partners, joint venturers, successors-in-interest, associations, corporations, partnerships, or other non-individual entities, list the individual owners of those entities.
2. Enter the percentage of ownership interest that each constituent member holds; for example, if there are three equal owners, enter "33-1/3" for each. The total interest of all members should equal 100 percent.
3. Indicate whether the ownership percentages represent the addition of any new owners since QS initially was issued. If any of the owners listed were added since QS were issued, you must answer YES.

#### **BLOCK C - CERTIFICATION**

- 1-3. Sign and date the application in the presence of Notary Public, and print your name.
4. Authorized representatives must submit proof of authorization from QS owner and state title.
- 5-7. Signature, commission expiration date, and stamp of notary public.  
Not to be completed by the person submitting this application.