OMB Control No. 0648-0398 Expiration Date: 4/30/2009



Revised: 12/05/2008

IFQ Permit Holder Fee Submission Form

U.S. Department of Commerce/NOAA
National Marine Fisheries Service (NMFS)
Office of Operations, Management and Information (OMI)
P.O. Box 21668
Juneau, Alaska 99802-1668



BLOCK A OVERPAYMENT						
If your estimated Balance Due is less than zero (deficit), you MUST select one of the following options:						
[] Apply Overpayment to Future Fee Liabilities OR [] Issue Refund						
BLOCK B IDENTIFICATION OF IFQ PERMIT HOLDER						
1. Name of IFQ Permit Holder	2. NMFS Person ID					
	3. Taxpayer ID (Employer ID No. or SSN)					
	4. Date of Birth or Date of Incorporation					
5. Business Mailing Address Permanent [] or Temporary []						
6. Business Telephone No. 7. Business Fax No.	8. Business E-mail Address (if any)					
	PCK C FEE LIABILITY SUMMARY					
Check if you agree with your IFQ Fee Liability Summary. [] YES [] NO						
If you have checked YES , please date and sign your name where designated in Block D, complete Block E, and mail this Fee Submission Form with your payment, or as indicated in Block E, in the envelope provided.						
If you have checked NO , complete Block F (Fee Calculation) using the fee calculation instructions (pages two and three of the attached instructions). After you have completed Block F, return to Block D on page 1 and print, sign, and date the Fee Submission Form, complete Block E, and mail the form with your payment, in the envelope provided.						
BLOCK D						
SIGNATURE 1. Drinted Name of IEO Parmit Holder or Authorized Agent (If agent, attach authorization)						
1. Printed Name of IFQ Permit Holder or Authorized Agent (If agent, attach authorization)						
2. Signature of IFQ Permit Holder or Authorized Agent	3. Date					

BLOCK E METHOD OF PAYMENT					
[] Personal Check [] Cashiers Check [] Money Order made payab	ole to National Marine Fisheries Service (NMFS)				
REMINDER! Sign your check. If paying for multiple permit holders, include their completed and signed Fee Submission Forms.					
[] Charge to the following: [] Visa [] Mastercard [] American	Express [] Discover [] Novus				
Card No: Expiration Date:					
Amount of Payment: Name as Printed on Card:					
Signature of Card Holder: D	Date:				

STOP!

HAVE YOU COMPLETED BLOCK E AND INCLUDED PAYMENT OF YOUR IFQ FEE? HAVE YOU MADE A COPY OF YOUR FEE SUBMISSION FORM AND CHECK/MONEY ORDER FOR YOUR RECORDS?

RAM DOES NOT SEND VERIFICATION OF PAYMENT AND STRONGLY RECOMMENDS YOU RETAIN COPIES FOR YOUR RECORDS.

BLOCK F – FEE CALCULATION							
Permit Number	Date of Landing	Port Location	IFQ Pounds	Standard Ex-vessel Price	Actual Ex-vessel Price	Total	
Sample	3/20/2005	Sitka	5000		\$2.20	\$11,000	
1.						•	
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							
16.							
17. Ex-vessel Value Total (add lines 2-16):							
18. Plus Total Adjustments (retros, bonuses):							
19. Subtotal (add lines 17 and 18):							
20. Fee Liability* (multiply the published fee percentage by line 19):							
21. Less Pre-payments or Credits (if any):							
22. Balance Due (enter result after subtracting line 21 from 20):							
23. Enclosed Payment Amount:							

^{*}Your fee liability is based on the total value received for IFQ halibut or sablefish landed on your IFQ permit during the IFQ fishing year. It should represent the total dollar value of IFQ pounds before any deductions are made for goods and services provided (*i.e.*, bait, ice, fuel, repairs, machinery replacement, *etc.*), multiplied by the NMFS published fee percentage for the IFQ fishing year.

This information is used to verify the identity of the applicant(s) and to accurately retrieve confidential records related to federal permits. The primary purpose for requesting the SSN/TIN is for the collection and reporting on any delinquent amounts arising out of such person's relationship with the government pursuant to the Debt Collection Improvement Act of 1996 (Public Law 104-134). Personal information is confidential and protected under the Privacy Act (5 U.S.C. 552a). Business information may be disclosed to the public.

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 2.0 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, Alaska Region, Attn: Assistant Regional Administrator, Sustainable Fisheries Division, P.O. Box 21668, Juneau, AK 99802.

ADDITIONAL INFORMATION

Before completing this form please note the following: 1) Notwithstanding any other provision of the 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 effort 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. It is also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics.

Instructions for IFQ PERMIT HOLDER FEE SUBMISSION FORM

BLOCK A -- OVERPAYMENT

If you have a credit from prepayments of the previous year or a balance due that is less than zero (deficit), you must choose to receive a refund or a credit on your future IFQ liabilities. All refunds will be issued out of the National Oceanic and Atmospheric Administration, Department of Finance, in Silver Spring, Maryland. **Please allow a minimum of eight weeks for your refund to be issued.** If you do not choose one of these options and have an amount due, it will automatically be credited to your IFQ Fee Liability Account.

BLOCK B -- IDENTIFICATION OF IFQ PERMIT HOLDER

Enter the information requested below in the designated areas on the IFQ Permit Holder Fee Submission Form.

- 1. <u>Name of IFQ Permit Holder</u>: Full name of the individual, corporation, association, or partnership that is the holder of the permit.
- 2. <u>NMFS Person ID</u>: Identification number assigned to the permit holder by NMFS/RAM.
- 3. <u>Tax ID (EIN or SSN).</u> Enter social security number (SSN) if applicant is an individual. Enter employer identification number (EIN) if applicant is a corporation, partnership, association or other non-individual business entity.
- 4. <u>Date of birth or Date of incorporation</u>. Enter date of birth if applicant is an individual; enter date of incorporation if applicant is a corporation, partnership, association or other non-individual business entity.
- 5. <u>Business Mailing Address</u>: Business mailing address where information should be sent; include street or P.O. box number, state, and zip code. Check whether the address provided is a permanent or temporary address. If the address is a permanent address, the address will be updated in the official RAM database. If the address is a temporary address, it will be used on a one-time-only basis for processing this form and RAM's database will not be changed.
- 6-8. <u>Business Telephone Number</u>, Fax Number, and E-mail Address: Business telephone number, fax number, including area codes, and e-mail address, if available. Note: It is important to provide a number where messages can be left to avoid delay in processing the Fee Submission Form if any questions arise.

BLOCK C -- AGREEMENT WITH IFQ FEE LIABILITY SUMMARY

All permit holders must complete Blocks A through E of the IFQ Permit Fee Submission form. If you indicated in Block C that you are not in agreement with the Summary, then Block F (Fee Calculation) must also be completed.

BLOCK D - SIGNATURE OF PERMIT HOLDER OR AUTHORIZED AGENT

1. <u>Printed Name of IFQ Permit Holder or Authorized Agent</u>: Print or type the full name of the permit holder or authorized agent signing on behalf of the permit holder. **Note**: If an agent is acting on behalf of the permit holder, written authorization signed by the permit holder must be submitted with the Fee Submission Form.

- 2. <u>Signature of IFQ Permit Holder or Authorized Agent</u>: The permit holder or authorized agent must sign and date the application where indicated. The application will not be considered without the signature of the permit holder or authorized agent.
- 3. <u>Date</u>: Indicate the date on which the Fee Submission Form is signed.

BLOCK E -- METHOD OF PAYMENT

- 1. If paying by personal check, cashiers check, or money order, check the appropriate box to indicate the form of payment being used to pay your IFQ Fee Liability. A copy of your check or money order should be retained for your own records.
- 2. If paying by credit card, check the box that indicates the type of card used. **Note:** Only the credit cards listed are accepted for payment through NMFS/RAM at this time. The credit card number, expiration date, the name as printed on the card, and the card holder's signature must be completed for RAM to accept this form of payment. **If any of the required credit card information is missing, your payment WILL NOT be accepted.**

BLOCK F -- FEE CALCULATION

Complete this block <u>ONLY</u> if you indicated in Block C that you did not agree with your IFQ Fee Liability Summary.

1-16. <u>Permit Number</u>: Enter permit number(s).

<u>Date of Landing</u>: Enter date(s) the landing(s) was/were made.

Port Location: Enter the port(s) where landing(s) was/were made.

<u>IFQ Pounds</u>: Enter the number of IFQ pounds landed (include any retained pounds) on permit(s) for specific date(s). "IFQ pounds" is net weight for Halibut and round weight for Sablefish

<u>Standard Ex-Vessel Price</u>: Enter the standard ex-vessel price located on your IFQ Fee Liability Summary. You may use either the standard price /or the actual price for each landing in your summary.

<u>Actual Ex-Vessel Price</u>: Enter the actual ex-vessel value for this permit. You may use either the standard price or the actual price for each landing in your summary.

<u>Total</u>: Multiply the total pounds landed on the permit(s) by the standard or actual ex-vessel price to get the total for each landing.

- 17. Ex-vessel Value Total: Add lines 2 through 16 to get the subtotal of fees owed for all permits.
- 18. Plus Total Adjustments: Add total adjustments (retros or bonuses paid in current year for previous year).
- 19. <u>Subtotal</u>: Add lines 17 and 18.
- 20. Fee Liability: Multiply the permit(s) subtotal (line 19) by the published fee percentage.
- 21. <u>Less Pre-Payments or Credits</u>: Subtract any pre-payments or credits from line 20. If you have a pre-payment or credit, it will be indicated on your IFQ Fee Liability Summary.
- 22. <u>Balance Due</u>: This indicates your balance due or credit after subtracting line 21 from 20. If you show a credit, return to Block A and check whether you would like your credit refunded or have it applied to future fee liabilities. If you show a balance owed, fill in line 23.

23. <u>Enclosed Payment Amount</u>: If you show a balance owed, enter the amount of the payment you will be submitting.

Do not forget to sign and enclose your personal or certified check or money order and send it to:

U.S. Dept. of Commerce/NOAA, National Marine Fisheries Service, Office of Operations, Management and Information (OMI), P.O. Box 21668, Juneau, Alaska 99802-1668.

If paying by credit card, make sure <u>ALL</u> requested card information is provided. Do not mail cash.

We will not be sending receipts for payments received by check or money order, so we strongly recommend that you retain a copy of this completed form and your check/money order for your records. Only payments received by credit card will be sent computer-generated receipts after those payments are processed.

If you need assistance in completing this form, or you have questions about the IFQ Cost Recovery Program, or any other RAM program, call toll free at (800) 304-4846 (#2) or (907) 586-7202 (#2). RAM's program information, applications, and reports can also be located on the Alaska Region Internet site at www.alaskafisheries.noaa.gov.