FLATFISH EXCHANGE APPLICATION

Fishing Year:

Date of Transfer Request:

NOAA/National Marine Fisheries Service Sustainable Fisheries Division P.O. Box 21668 Juneau, AK 99802-1668



Fax: 907-586-7131 Telephone: 907-586-7228

Indicate type of Participant:

This request must be completed by a representative from the Western Alaska Community Development Quota (CDQ) group or Amendment 80 (A80) Cooperative proposing to exchange amounts of flatfish.

This form must be submitted ONLINE.

					[] CDQ Group [] A80 Cooperative				
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BLOCK A – CDQ GROUP OR A80 COOPERATIVE INFORMATION									
1. CDQ Group or A80 Cooperative Name:					2. CDQ Group or A80 Cooperative ID Number:				
3. Business Telephone Number:			4. Business Fax Number:		umber:		5. Business e-mail Address:		
6. Representative's Name:					7. Representative's Signature:				
BLOCK B - AMOUNT EXCHANGED									
Species Exchanged In					Species Exchanged Out				
Species Code	Indicate CDQ or A80	Amount (If CDQ, nearest 0.001 mt) (If A80, nearest mt)			Species Code	C	ndicate DQ or A80	Amount (If CDQ, nearest 0.001 mt) (If A80, nearest mt)	
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BLOCK C – CERTIFICATION									
Under penalty of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information presented hereon is true, correct, and complete.									
1. Signature of Designated Representative:					2. Date:				
3. Printed Name of Designated Representative:									

Instructions FLATFISH EXCHANGE APPLICATION

NMFS will process a Flatfish Exchange Application provided that a Western Alaska Community Development Quota (CDQ) group or Amendment 80 (A80) cooperative submits an online application with all applicable fields accurately filled in.

Each CDQ group or A80 cooperative may request that NMFS exchange flatfish (flathead sole, rock sole, and yellowfin sole, or any combination of two flatfish species). NMFS will approve the exchange application if the CDQ group or A80 cooperative exchanging quota and ABC reserve has sufficient quota and ABC reserve available for exchange. Each CDQ group or A80 cooperative is limited to three exchanges per calendar year.

NMFS approval of an exchange application is required prior to the usage of the flatfish TAC. NMFS will approve the exchange application if the CDQ group or A80 cooperative:

- ♦ Exchanging flatfish has sufficient CDQ ABC reserves or A80 ABC reserves for the flatfish species which it is requesting to increase its CDQ or A80 CQ;
- Requesting an exchange of flatfish surrenders an equal amount of unused CDQ or A80 CQ for flatfish;
- ♦ Has not received three approved Flatfish Exchanges during that calendar year;
- ♦ NMFS receives a completed flatfish exchange application from a CDQ group or A80 cooperative during the calendar year that the Flatfish Exchange would be effective;
- Requesting an exchange of flathead sole, rock sole, or yellowfin sole has not otherwise received additional allocations or roll-overs of flatfish CDQ or CQ that could cause the amount initially specified as the ABC reserve to be exceeded.

If the request is approved, NMFS will make the requested exchange and notify the requester when the exchange is completed. The CDQ or A80 CQ will be exchanged as of the date NMFS approves the exchange application and is effective only for the remainder of the calendar year in which the exchange occurs.

No exchange, adjustment, apportionment of flatfish may take effect until NMFS publishes notification in the *Federal Register* with a statement of the findings on which the exchange, adjustment, or apportionment is based. Each NMFS approved flatfish exchange application is debited as one exchange, on the effective date of the notice of adjustment or apportionment in the *Federal Register*.

Electronic Certification

Designated representative must log into the system and create an exchange application as indicated on the computer screen. By using the exchanger's NMFS ID, password, and Transfer Key and submitting the exchange application, the designated representative certifies that all information is true, correct, and complete

Retain a copy of completed request for your records.

When complete, submit

Online: http://alaskafisheries.noaa.gov

If you need additional information regarding CDQ or A80 ABC Reserve Exchange of flathead sole, rock sole, or yellowfin sole, contact Sustainable Fisheries Division at 907-586-7228.

COMPLETING THE APPLICATION

Enter the following information for each transfer.

Date of Transfer Request

Fishing Year

Indicate whether requestor is a CDQ Group or A80 Cooperative

BLOCK A -- CDQ GROUP OR COOPERATIVE INFORMATION

- 1. Name of CDQ group or A80 Cooperative
- 2. CDQ group or A80 Cooperative ID number
- 3-5. Business telephone number, business fax number, and business e-mail address
- 6-7. Printed name and signature of representative

BLOCK B -- AMOUNT EXCHANGED

Identify the ABC reserve amount to be removed from the eligible flatfish CDQ ABC reserve or A80 ABC reserve for conversion to CDQ or Amendment 80 CQ.

Species Exchanged In

- 1. Species Code. For each species for which an exchange is being requested, enter the species code.
- 2. CDQ or A80. Indicate whether exchange is CDQ or A80
- 3. <u>Amount</u>. Specify the amount being exchanged. The CDQ allocations must be recorded at the 0.000 mt. The Amendment 80 allocations must be recorded to the nearest metric ton.

Identify an equivalent amount of CDQ or A80 CQ of another eligible flatfish species that would be surrendered.

Species Exchanged Out

- 1. Species Code. For each species for which an exchange is being requested, enter the species code.
- 2. <u>CDQ or A80</u>. Indicate whether exchange is CDQ or A80
- 3. <u>Amount</u>. Specify the amount being exchanged. The CDQ allocations must be recorded at the 0.000 mt. The Amendment 80 allocations must be recorded to the nearest metric ton.

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing 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 99802-1668.

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 the commercial fishing effort of the CDQ program in the BSAI and the Amendment 80 Program 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.