Revised: 05/28/2013 OMB Control No. 0648-0272 Expiration Date: 11/30/2015

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|  | **APPLICATION FOR**  **IFQ/CDQ HIRED MASTER PERMIT** | |  | | --- | | U.S. Dept. of Commerce/NOAA  National Marine Fisheries Service (NMFS)  Restricted Access Management (RAM)  P.O. Box 21668  Juneau, AK 99802-1668  (800) 304-4846 toll free, (907) 586-7202 in Juneau  (907) 586-7354 fax | |

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| ***BLOCK A -- PURPOSE OF APPLICATION*** | |
| 1. Indicate whether adding or deleting a hired master  permit holder:  [\_\_] Add Permit Holder [ ] Delete Permit Holder | 2. Should the hired master permit(s) be mailed directly  to the hired master(s):  [ ] YES [ ] NO |
| 3. Indicate the permit(s) to which this action applies:  [\_\_] Sablefish Permit Number(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Category: A [ ] B [ ] C [ ] D [ ]  [ ] Halibut Permit Number(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Category: A [ ] B [ ] C [ ] D [ ]  **NOTE:** Category "A" (freezer vessel) IFQ permit holders and CDQ halibut permit holders are not required to  send proof of vessel ownership but MUST provide the vessel information requested in ***Block C***. | |

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| ***BLOCK B – IFQ/CDQ\* PERMIT HOLDER* *INFORMATION*** | | |
| 1. Name of IFQ Permit Holder: | | 2. NMFS Person ID: |
| 3. Business Mailing Address: Permanent [ ] Temporary [ ] | | |
| 4. Business Telephone Number: | 5. Business Fax Number: | 6. E-mail address *(if available)*: |

\*Individual Fishing Quota (IFQ) and Western Alaska Community Development Quota (CDQ)

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| ***BLOCK C -- IDENTIFICATION OF VESSEL***  ***UPON WHICH IFQ/CDQ HALIBUT OR SABLEFISH WILL BE FISHED*** | | | |
| 1. Vessel Name: | 2. Length Overall: | 3. ADF&G Number: | 4. USCG Number: |

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| ***BLOCK D – IFQ PERMIT HOLDER FOR QUOTA SHARE IN CATEGORY B, C, OR D*** |
| 1. Does the IFQ Permit Holder hold an ownership interest of at least 20% in the vessel named in ***Block C***?  [ ] YES [ ] NO    2. You must provide the following information in support of your ownership interest in the vessel:  [ ] For a United States Coast Guard (USCG) documented vessel, a copy of the USCG Abstract of Title **OR**  [ ] For an undocumented vessel, a copy of the State of Alaska, Department of Fish and Game (ADF&G) vessel license or registration that lists the IFQ permit holder as an owner.  \*If title or registration documents do not show that the IFQ permit holder owns a minimum of 20% ownership  of the vessel, **attach additional written documentation** showing percentage of ownership**.**  ♦ If the IFQ permit holder is a **non-individual entity**, such as a corporation, partnership or association, proceed to ***Block F*.**  ♦ If the IFQ permit holder is an **individual**, proceed to ***Block E***. |

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| ***BLOCK E – IFQ PERMIT HOLDERS FOR QUOTA SHARE IN CATEGORY B, C, OR D:***  ***INDIVIDUALS ONLY*** |
| 1. Has the IFQ permit holder held an ownership interest of at least 20% in the vessel named in ***Block C*** for  the 12 months immediately preceding the date of this application?    [ ] YES [ ] NO  **If NO**, is the individual IFQ permit holder owner applying for a hired master permit and seeking an exemption  from the 12-month vessel ownership requirement?  [ ] YES [ ] NO  **IF YES**, Go to ***Block G***. |

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| ***BLOCK F– HIRED MASTER INFORMATION***  ***(If owner has more than one hired master permit holder, use the additional permit holder sections below)*** | | |
| 1. Full name of Hired Master Permit Holder: | | 2. NMFS Person ID: |
| 3. Business Mailing Address: Permanent [ ] Temporary [ ] | | |
| 4. Business Telephone Number: | 5. Business Fax Number: | 6. E-mail Address *(if available)*: |

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| ***BLOCK F -- HIRED MASTER INFORMATION (Continued)***  *(If you have more than one hired master permit holder, use the additional permit holder sections below)* | | |
| 1. Full name of Hired Master Permit Holder: | | 2. NMFS Person ID: |
| 3. Business Mailing Address: Permanent [ ] Temporary [ ] | | |
| 4. Business Telephone Number: | 5. Business Fax Number: | 6. E-mail Address *(if available)*: |

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| ***BLOCK F -- HIRED MASTER INFORMATION (Continued)***  *(If you have more than one hired master permit holder, use the additional permit holder sections below)* | | |
| 1. Full Name of Hired Master Permit Holder: | | 2. NMFS Person ID: |
| 3. Business Mailing Address: Permanent [ ] Temporary [ ] | | |
| 4. Business Telephone Number: | 5. Business Fax Number: | 6. E-mail Address: *(if available)* |

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| ***BLOCK G – EXEMPTION INFORMATION*** | | | |
| 1. Indicate the type of exemption you are seeking.  [ ] Vessel *lost* -- attach **USCG Form 2692, , “Report of Marine Accident, Injury or Death,”** and  answer **Questions 2 through 8.**  **[ ]** Vessel *irreparably damaged* – attach **USCG FORM 2692** and answer **Questions 2 through 8.**  [ ] Vessel *temporarily disabled* and unavailable for at least 60 days – attach **USCG Form 2692;**  **Attach** documents showing the need for 60 days or more to repair this vessel and answer **Questions 9**  **through 16**. | | | |
| **Claim of Vessel Loss or Irreparable Vessel Damage** | | | |
| 2. Name of the vessel: | | | 3. ADF&G Number of vessel: |
| 4. USCG Number of the vessel: |
| 5. Date (mm/dd/yy) the vessel was  lost or irreparably damaged: | 6. Indicate whether attached USCG Form 2692 was submitted to USCG  concerning this incident:  [\_\_\_] YES [\_\_\_] NO | | |
| 7. Indicate cause of the vessel loss or damage [may check more than one]:  [\_\_] Act of God [\_\_] Act of war [\_\_] A collision  [\_\_] An act or omission of a party other than [\_\_] Any other event not caused by the  the IFQ permit holder or representative willful misconduct of the IFQ  of the IFQ permit holder permit holder or representative of  the IFQ permit holder: | | | |
| 8. Before the vessel was lost or irreparably damaged, was the vessel used to harvest halibut or sablefish QS  belonging to the IFQ permit holder; Proceed to ***Block F***.  [ ] YES [ ] NO | | | |
| **Claim of Temporary Vessel Disablement** | | | |
| 9. Name of the vessel: | | | 10. ADF&G Number of vessel: |
| 11. USCG Number of the vessel: |
| 12. Date (mm/dd/yy) the vessel was  temporarily disabled: | 13. Was the attached USCG Form 2692 submitted to USCG concerning this incident?  [\_\_\_] YES [\_\_\_] NO | | |
| 14. Was the vessel temporarily disabled by an accident  that materially and adversely affected the vessel’s  seaworthiness or fitness for service?  [\_\_\_] YES [\_\_\_] NO | | 15. Does the vessel require repairs from this incident  that require at least 60 days to complete?      [\_\_\_] YES [\_\_\_] NO | |
| 16. Before the vessel was temporarily disabled, was the vessel used to harvest halibut or sablefish IFQ  belonging to the IFQ permit holder? Proceed to ***Block F***.  [ ] YES [ ] NO | | | |

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| ***BLOCK H – CERTIFICATION OF IFQ PERMIT HOLDER*** | |
| Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information presented here is true, correct, and complete. | |
| 1. Signature of Applicant *(or Authorized Representative)*: | 2. Date: |
| 3. Printed Name of Applicant *(or Authorized Representative)*: If representative, **attach** authorization | |

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***PUBLIC REPORTING BURDEN STATEMENT***

Public reporting burden for this collection of information is estimated to average one hour 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 estimate or any other aspect of this collection of information, to Assistant Regional Administrator, Sustainable Fisheries Division, NMFS, Alaska Region, 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*.); 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.

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| INSTRUCTIONSAPPLICATION FOR IFQ/CDQ HIRED MASTER PERMIT |

Individual Fishing Quota (IFQ) permit holders must use this application to obtain hired master permits in the IFQ Program and by CDQ permit holders in the Western Alaska Community Development Quota (CDQ) Program.

A separate application must be completed for each vessel, each IFQ permit number, and each CDQ permit number.

For the complete text of the regulations on this subject, see 50 CFR 679.4(d) and 50 CFR 679.42 available at [www.ecfr.gov](http://www.ecfr.gov).

An IFQ hired master permit authorizes the individual identified on the IFQ hired master permit to land IFQ halibut or IFQ sablefish for debit against the specified IFQ permit until the IFQ hired master permit expires, is revoked, suspended, surrendered in accordance with 50 CFR 679.4(a)(9), modified under 15 CFR part 904, or cancelled on request of the IFQ permit holder.

***VESSEL OWNERSHIP REQUIREMENTS***

**♦ An IFQ permit holder who is not an individual** (e.g., a corporation, partnership, association, or other non-individual entity)

**(1)** must designate a hired master to fish their IFQ or to obtain a permit to access their account and

**(2)** must own a minimum of 20 percent ownership interest in the vessel that the hired master will

use to fish their IFQ.

**♦ An IFQ permit holder who is an individual**

may designate a master to harvest catcher vessel quota share (QS in Category B, C or D)

if the IFQ permit holder:

**(1)** was an initial recipient of QS, and

**(2)** meets the vessel ownership requirements, EXCEPT

an IFQ permit holder may not designate a master to harvest

□ halibut IFQ in IPHC Regulatory Area 2C, or

□ sablefish IFQ in southeast Alaska

**(3)** for the 12 months prior to filing the application to hire a master, the individual IFQ permit holder

□ must own (either directly or indirectly) at least 20 percent of the vessel which the hired master

will use to fish the IFQ belonging to the IFQ permit holder, or

□ must meet the requirements for an exemption from the 12-month vessel ownership requirement

due to total vessel loss, irreparable vessel damage, or temporary vessel disablement.

An IFQ permit holder owns a vessel *directly* by owning the vessel in the name of the IFQ permit holder. An IFQ permit holder owns a vessel *indirectly* by owning an interest in the corporation, partnership, association or other entity that owns the vessel.

The IFQ permit holder annually must submit proof of ownership to NMFS for a vessel that the hired master will use to fish the IFQ.

♦ **For a documented vessel, an IFQ permit holder who is not an individual** (e.g., corporation, partnership, association, or other non-individual entity) is listed as a vessel owner on the USCG Abstract of Title for the vessel. If the USCG Abstract of Title does not show that the IFQ permit holder owns a minimum 20-percent of the vessel, the IFQ permit holder *must submit additional written documentation.*

♦ **For a documented vessel, an IFQ permit holder who is an individual** is listed as a vessel owner on the USCG Abstract of Title for the vessel. If the USCG Abstract of Title does not show that the individual IFQ permit holder owns a minimum 20-percent of the vessel for the 12 months prior to this application, the individual IFQ permit holder *must submit additional written documentation*.

♦ **For an undocumented vessel**, **an IFQ permit holder who is not an individual** (corporation, partnership, association or other non-individual entity) is listed as a vessel owner on the ADF&G license or registration for the vessel. If the ADF&G vessel license or registration does not show that the IFQ permit holder owns a minimum 20-percent of the vessel, the IFQ permit holder must *submit additional written documentation.*

♦ **For an undocumented vessel, an IFQ permit holder who is an individual** is listed as a vessel owner on the ADF&G license or registration for the vessel. If the ADF&G vessel license or registration does not show that the individual IFQ permit holder owns a minimum 20-percent of the vessel for the 12 months prior to the application, the individual IFQ permit holder must *submit additional written documentation*.

♦ **Indirect ownership of vessel**: If the IFQ permit holder is not listed as an owner of the vessel on the USCG Abstract of Title or the ADF&G vessel license or registration, the IFQ permit holder must submit documentation establishing indirect ownership of the vessel. Such documentation may be corporate annual reports, corporate meeting minutes, stock certificates, other corporate, partnership, or association documents, the vessel purchase and sales agreement, etc.

**♦ Not required to send proof of vessel ownership.** Category "A" (freezer vessel) IFQ permit holders are not required to send proof of vessel ownership but must provide the vessel information requested in

***Block C***.

**♦ Not required to send proof of vessel ownership.** CDQ permit holders are not required to provide the vessel information requested in ***Block C***.

***EXEMPTIONS FROM THE 12-MONTH VESSEL OWNERSHIP REQUIREMENT***

**Total loss of a vessel or irreparable damage to a vessel**

An individual IFQ permit holder, who is seeking to use a hired master on his or her vessel, may receive an exemption from the *12-month vessel ownership requirement. However*, the IFQ permit holder still must own a minimum 20-percent ownership interest in that vessel.

Causes of loss or damage: An act of God; an act of war; a collision; an act or omission of a party other than the IFQ permit holder or representative of the IFQ permit holder; , or any other event not caused by the willful misconduct of the individual IFQ permit holder or representative of the IFQ permit holder.

Halibut or sablefish IFQ harvest: Prior to loss or damage, the vessel was used to harvest halibut or sablefish IFQ of the IFQ permit holder.

Attach copy of USCG Form 2692 submitted to the USCG concerning this incident.

20-percent ownership interest. The IFQ permit holder is applying for a hired master permit to harvest IFQ from a vessel in which the IFQ permit holder owns a minimum 20-percent ownership interest as of the date of this application.

**Vessel is temporarily disabled** **and unavailable for at least 60 days**

Causes of temporary disablement: result from repairs required by an accident that materially and

adversely affected the vessel’s seaworthiness or fitness for service. The repairs from the accident

require at least 60 days to be completed.

Halibut or sablefish IFQ harvests: Prior to temporary disablement, the vessel was used to harvest

halibut or sablefish IFQ of the IFQ permit holder.

Attach copy of USCG Form 2692 submitted to the USCG concerning this incident.

20-percent ownership interest. The IFQ permit holder is applying for a hired master permit to harvest

IFQ from his or her vessel in which he or she owns a minimum 20-percent ownership interest as of the

date of this application.

***GENERAL INSTRUCTIONS***

Type or print information legibly in ink and retain a copy of completed application for your records.

Submit completed, original application and proof of vessel ownership:

By mail to: **NMFS Alaska Region**

**Restricted Access Management (RAM)**

**P.O. Box 21668**

**Juneau, AK 99802-1668**

Bydelivery to: **709 West 9th Street, Room 713**

**Juneau, AK 99801**

By fax to: **907-586-7354**

Applications submitted via fax will be accepted only if the faxed copy is legible.

**Please allow at least 10 working days for your application to be processed.** 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”)**

**Telephone (in Juneau): 907-586-7202 (press “2”)**

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

***COMPLETING THE APPLICATION***

**BLOCK A - PURPOSE OF APPLICATION**

1. Indicate whether adding or deleting a hired master permit holder.

2. Indicate whether the hired master permit(s) should be mailed directly to the hired master(s).

3. Indicate the Sablefish Permit Number and category and/or the Halibut Permit Number and category to which this action applies. Halibut and Sablefish permit numbers appear on the IFQ fishing permit.

**BLOCK B – IFQ/CDQ PERMIT HOLDER INFORMATION**

1. Name of IFQ Permit Holder as it appears on applicant’s QS Holder Summary Report or IFQ permit.

2. NMFS Person ID is the number assigned to the permit holder by RAM.

3. Business Mailing Address, including street or P.O. Box, city, state, and zip code. If you choose Permanent Address, we will update the official RAM database. If you choose Temporary Address, we will use it for this one application and we will not make any changes to the RAM database.

4-6. Business Telephone Number, Business Fax Number, and E-mail Address where the permit holder or the authorized representative can be reached, including area codes.

BLOCK C – IDENTIFICATION OF VESSEL UPON WHICH IFQ/CDQ HALIBUT WILL BE FISHED

1. Name of the vessel on which the hired master will be fishing owner’s IFQ.

2. Length overall of the vessel, in feet.

3. ADF&G vessel registration number of the vessel.

4. Official USCG documentation number of the vessel.

**BLOCK D – IFQ PERMIT HOLDER FOR QUOTA SHARE IN CATEGORY B, C, OR D**

1. Indicate whether the IFQ Permit Holder holds an ownership interest of at least 20 percent in the

Vessel named in ***Block C***.

2. **IF YES,** attach: Documentation of Ownership\*

For a USCG documented vessel, a copy of the USCG Abstract of Title.

For an undocumented vessel, a copy of the ADF&G vessel license or registration that lists the permit holder as an owner.

If title or registration documents do not show that the IFQ permit holder owns a minimum of 20% ownership of the vessel, **attach** additional written documentation showing percentage of ownership.

**BLOCK E -- IFQ PERMIT HOLDERS FOR QUOTA SHARE IN CATEGORY B, C, OR D:**

**INDIVIDUALS ONLY**

1. Indicate whether the IFQ permit holder held an ownership interest of at least 20 percent in the vessel named in ***Block C*** for the 12 months immediately preceding the date of this application.

**If YES**, go to ***Block G***

**BLOCK F – HIRED MASTER PERMIT HOLDER INFORMATION**

**NOTE:** **CDQ permit holders may attach to this application a list of requested hired master permit holders.** The list **MUST** include the full name, address, and date of birth of each of the individuals listed. Complete this section for each permit holder for whom you are requesting an IFQ Hired Master Permit.

1. Name of Hired Master Permit Holder - Name of the individual to be named hired master.

2. NMFS Person ID - The number assigned to the hired master permit holder by RAM.

3. Business Mailing Address - Include street or P.O. Box, city, state, and zip code.

If you check Permanent Address, we will update the official RAM database. If you choose Temporary Address, we will use it for this one application and there will not be any changes to the RAM database.

Items will be sent by first class mail to the IFQ hired master permit holder’s permanent address unless you provide alternate instructions. CDQ hired master permits will be sent to the CDQ corporation.

4-6. Business Telephone No., Business Fax No. and E-mail Address - Business telephone number, business fax number, and E-mail address where the permit holder can be reached, including area code.

**BLOCK G – EXEMPTION INFORMATION**

1. Indicate the type of exemption you are seeking and **attach** appropriate documentation.

Vessel lost -- **attach** USCG Form 2692 that you submitted to USCG and **answer** Questions 2 through 8.

Vessel irreparably damaged -- **attach** USCG Form 2692 that you submitted to USCG and **answer** Questions 2 through 8.

Vessel temporarily disabled and unavailable for at least 60 days –

**attach** USCG Form 2692 that you submitted to USCG and

**attach** documents showing the need for 60 days or more to repair this vessel.

**answer** Questions 9 through 16.

Claim of Vessel Lost or Vessel Irreparably Damaged

2. Name of the vessel.

3. ADF&G Number of vessel.

4. USCG Number of the vessel.

5. Date (mm/dd/yy) the vessel was lost or irreparably damaged.

6. Indicate whether attached USCG Form 2692 was submitted to USCG concerning this incident.

7. Indicate the cause of the vessel loss or damage.

8. Before the vessel was lost or irreparably damaged, indicate whether the vessel was used to harvest halibut or sablefish QS belonging to the IFQ permit holder. Go to ***Block C***.

Claim of Temporary Vessel Disablement

9. Name of the vessel.

10. ADF&G number of vessel.

11. USCG number of the vessel.

12. Date (mm/dd/yy) the vessel was temporarily disabled.

13. Indicate whether the attached USCG Form 2692 was submitted to USCG concerning this incident.

14. Indicate whether the vessel was temporarily disabled by an accident that materially and adversely affected the vessel’s seaworthiness or fitness for service.

15. Indicate whether the vessel requires repairs from this incident that require at least 60 days to complete.

16. Before the vessel was temporarily disabled, indicate whether the vessel was used to harvest halibut or sablefish QS belonging to the IFQ permit holder. Go to ***Block C***.

**BLOCK H - CERTIFICATION OF PERMIT HOLDER**

Enter printed name, signature, and date signed.

If completed by a Representative, **attach** authorization