Revised: 03/26/14 OMB Control No. 0648-xxxx Expiration Date: xx/xx/xxxx

**ANNUAL**

**GROUNDFISH Trawl**

**CATCHER VESSEL**

ECONOMIC DATA REPORT (EDR)

CALENDAR YEAR XXXX

This form can be downloaded from

<http://alaskafisheries.noaa.gov>



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| --- |
| ***PUBLIC REPORTING BURDEN STATEMENT***Public reporting burden for this collection of information is estimated to average 15 hours per response, including 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 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 for groundfish 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. |

**Introduction**

This report collects information on Gulf of Alaska Management Area (GOA) groundfish trawl operations. Pursuant to applicable regulations, data and identifiers reported may be used for program enforcement and determination of qualification for federal fisheries permit renewal. Consequently, identifiers and data may be disclosed to NOAA Enforcement, NOAA General Counsel, the Antitrust Division of the Department of Justice, the Federal Trade Commission, and NOAA Restricted Access Management Program.

Each person who held an LLP license designated for a catcher vessel and trawl gear and endorsed for the Central or Western GOA during a calendar year must submit an Annual Trawl Catcher Vessel EDR for that calendar year for each trawl catcher vessel operated in the Central or Western GOA by that person.

A completed EDR must be submitted for each calendar year on or before June 1 of the following year. An EDR must be timely and all information fields must be accurately completed according to instructions in this form.

All required reports must be submitted to the NMFS Data Collection Agent, Pacific States Marine Fisheries Commission electronically or by mail at the address provided below.

EDR Validation

To make sure that each company is consistently and accurately completing the EDR, an audit may be performed by a qualified accountant for the purpose of validating the data reported in this form. This step will ensure that the data can be relied upon to produce accurate and reliable information for the Alaska groundfish trawl fisheries.

If selected for validation, auditors will verify the data report by comparing specific elements of the report with your accounting records. To make this process as efficient and non-intrusive as possible, we suggest that you:

 1. Keep a copy of the completed EDR or certification pages you submit. Copy and attach extra sheets as needed.

 2. Keep a file that has all of the supporting information used in the preparation of the EDR.

 3. Make sure that the EDR agrees to the company’s highest level of financial information. For this purpose, the highest level of financial information is defined in order as:

 a. Audited financial statements

 b. Reviewed financial statements

 c. Compiled financial statements

 d. Tax returns.

If YOUR label address is incorrect or missing, please correct the error on the label or print your permanent name and address here.

|  |
| --- |
| Vessel Name |
| Company Name |
| Street address or P.O. Box Number |
| City, State, and Zip Code |

|  |
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| **NOTE:**Definition of “Leaseholder”: For the purpose of defining the persons responsible for submitting the EDR, a Leaseholder is a person, other than the owner of the catcher vessel for which the EDR is required, who: was identified as the leaseholder, in a written lease, of the catcher vessel, OR paid expenses of the catcher vessel, OR claimed expenses for the catcher vessel as a business expense on schedule C of his/her Federal Income Tax Return, or on a State Income Tax Return. |

**The due date for EDR Submissions is June 1, XXXY**

**EDR submitters are encouraged to complete the form online at https://survey.psmfc.org.**

If you have not received instructions for accessing the online EDR form by mail, please contact Pacific States Marine Fisheries Commission at 1-877-741-8913 or by email at EDR@psmfc.org

If not submitting the EDR form online, mail or FAX the completed EDR form by June 1, XXXY to:

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| --- |
| Pacific States Marine Fisheries CommissionNMFS Economic Data Reports205 SE Spokane, Suite 100Portland, OR 97202FAX No. 503-595-3450For more information, or if you have questions, please call toll free 1-877-741-8913 |

**Instructions for completing this EDR Form**

* Provide all information requested in each section.
* Record only whole numbers. Round up dollar figures to the next whole dollar.
* Record a zero (0) or not applicable (N/A) where appropriate, and do not skip any questions or leave any data entry cells blank.
* All information reported must be current and complete as of the date of submission, including post-season adjustments and settlements.

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**certification page – 1 of 2**

This is a required form. Provide all information requested below.

|  |
| --- |
| **Catcher Vessel Information** |
| Vessel Name | ADF&G Vessel Registration Number |
| Groundfish License Limitation Permit Number(s) |
| USCG Documentation Number  |
| Current Estimated Market Value of Vessel and Equipment ($) | Replacement Value of Vessel and Equipment ($) |

|  |
| --- |
| **Vessel Owner Information** |
| Name of company, partnership, or sole proprietorship |
| Business Telephone Number | Business Fax Number |
| Business E-mail address, if available |

|  |
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| **Vessel Leaseholder Information (if applicable)** |
| Name of company, partnership, or sole proprietorship |
| Business Telephone Number | Business Fax Number |
| Business E-mail address, if available |

**NOTE:** Any owner or leaseholder may appoint a designated representative to respond to questions in the EDR. The designated representative is the primary contact person for Pacific States on issues relating to data required in the EDR.

|  |
| --- |
| **Person Completing this Report (check one)**□ Owner (If your name and address are the same name and address provided in the Owner Information block above, the information does not need to be repeated here)□ Leaseholder (If your name and address are the same name and address provided in the Leaseholder Information block above, the information does not need to be repeated here)□ Designated Representative (complete information below) |
| Name | Title |
| Business Telephone Number | Business Fax Number |
| Business E-mail address, if available |

**CERTIFICATION PAGE – 2 of 2**

Select one of the following statements and provide any requested information. Check one box below. Note: The descriptions below refer to leasing of the vessel. Do not provide information regarding any quota leasing here..

|  |
| --- |
| □ You are the catcher vessel owner or leaseholder, and you harvested groundfish in the Central or Western GOA in the above described vessel during the XXXX calendar year. ⇒ Complete and submit **entire EDR** for the XXXX calendar year. |
| □ You are the catcher vessel owner, you leased or sold the above described vessel to another party, and did not harvest groundfish in the Central or Western GOA in the above described vessel during the XXXX calendar year (provide the name, address, and telephone number of the person to whom you leased or sold the vessel during the XXXX calendar year below). OR You are the catcher vessel owner and vessel was lost or rendered permanently inoperable due to accident, and harvested no groundfish in the Central or Western GOA in the above described vessel during the XXXX calendar year. ⇒ Complete and submit the **EDR Certification Pages only**. |
| □ You are the catcher vessel owner or leaseholder, and no one harvested groundfish in the Central or Western GOA in the above described catcher vessel during the XXXX calendar year. ⇒ Complete and submit the **EDR Certification Pages only**. |
| **Buyer Information (if applicable)** |
| Buyer/Leaseholder Name |
| Business address |
| Telephone No (include area code) | Date of Sale or Lease (day/month/XXXX) |

**Certification Statement**

Read the following statement, and sign and date the box below:

|  |
| --- |
| I certify under penalty of perjury that I have reviewed all the information in this report and that it is true and complete to the best of my knowledge. |
| Signature | Date signed |
| Printed Name of Vessel Owner (or Designated Representative) |

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**Table 1: Vessel Characteristics: Fuel Consumption**

In the table below, report the vessel’s annual and average fuel consumption per hour during calendar year XXXX for each of the following activities. If not applicable, enter “NA”.

|  |  |  |
| --- | --- | --- |
| Activity | Average Gallons of Fuel per Hour | Annual FuelConsumption |
| Fishing  | gal/hr | gal |
| Steaming (not fishing) – empty | gal/hr | gal |
| Steaming (not fishing) – fully loaded with catch | gal/hr | gal |

**Table 2: Vessel Expenses, Annual**

In the table below, report the total direct expenditures during the calendar year for the following vessel costs:

**Fuel Cost, Annual**

**Gallons:** Record the total quantity of fuel purchased for the vessel during the previous calendar year, in gallons.

**Cost:** Record the total payment for fuel purchased for the vessel for all fishing and non-fishing operations during the previous calendar year, including all sales taxes and surcharges. Do not include the cost of lubrication or other fluids.

**Trawl Gear Cost:** Record the total direct expenditures for lease, purchase and/or repair of trawl fishing gear (including nets, doors, rollers, cables, etc.) during the previous calendar year. Report only the amount that was fully expensed for the year.

**Excluder Device Cost:** Record the total direct expenditures for lease, purchase and/or repair of excluder devices for salmon and halibut during the previous calendar year. Report only the amount that was fully expensed for the year.

|  |  |
| --- | --- |
| **Fuel**  | **Fishing Gear Costs** |
| Gallons | Cost | **Trawl Gear** | **Excluder Gear** |
| gal | $ | $ | $ |

**Table 3: Labor Payments to Captain and Crew**

In the table below, report the total direct payment to vessel crew and captain for labor performed in GOA groundfish trawl fisheries during the previous calendar year.

Report the payment amount actually paid to vessel crew and captain in settlements, not earnings before fishing-related expenses (such as fuel, bait, or food and provisions) were deducted. Exclude any payments for labor provided before or after groundfish fishing seasons. Exclude non-wage expenses such as payroll taxes, unemployment insurance, workmen’s compensation, and exclude costs of non-wage benefits provided such as paid travel, health insurance, or retirement.

**Number of Paid Harvest Crew Members (exclude the captain)**: Record the number of crew aboard the vessel (exclude captain) who provided harvesting labor during GOA groundfish trawl fisheries.

**Total Labor Payment to Harvest Crew (exclude the captain)**

Record the total payment made to crew (exclude the captain) for their labor. List the amount actually paid to crew in their settlement, *not* their earnings before crew-related expenses (such as fuel, bait, or food and provisions) were deducted.

**Captain Labor Payment**

Record the total payment made to the captain for his services during GOA trawl fisheries. List the amount actually paid to the captain, *not* the earnings before shared expenses (such as fuel, bait, or food and provisions) were deducted.

|  |  |
| --- | --- |
| CREW | CAPTAIN |
| Number of Paid Harvest Crew Members | Total Labor Payment to Harvest Crew | Total Labor Payment to Captain |
|  | $ | $ |

**Table 4: Harvest Crew Licenses/Permits**

In the table below, for each individual who worked as a captain or crewmember in GOA trawl fisheries during the previous calendar year, record either the Alaska Commercial Crew license number or a State of Alaska Commercial Fisheries Entry Commission (CFEC) gear operator permit number. Do not record more than one license or permit number for any individual, but include every individual that worked on the vessel as a captain or crewmember during ~~CR~~ GOA trawl groundfish fisheries.

For Commercial Crew Licenses, report the full 7-digit license number. For Gear Operator Permits, include the fishery code and permit number (e.g., M71B25321N). Indicate if the number reported is an ADF&G Commercial Crew License number or a CFEC Gear Operator Permit Number in the appropriate checkbox, and only record one license or permit number per crewmember.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Crewmember | **License/Permit Number** | **Check One** | Crewmember | **License/Permit Number** | **Check One** |
| ADF&G Crew License | CFEC Gear Operator Permit  | ADF&G Crew License | CFEC Gear Operator Permit  |
| **1** |  | [ ]  | [ ]  | **15** |  | [ ]  | [ ]  |
| **2** |  | [ ]  | [ ]  | **16** |  | [ ]  | [ ]  |
| **3** |  | [ ]  | [ ]  | **17** |  | [ ]  | [ ]  |
| **4** |  | [ ]  | [ ]  | **18** |  | [ ]  | [ ]  |
| **5** |  | [ ]  | [ ]  | **19** |  | [ ]  | [ ]  |
| **6** |  | [ ]  | [ ]  | **20** |  | [ ]  | [ ]  |
| **7** |  | [ ]  | [ ]  | **21** |  | [ ]  | [ ]  |
| **8** |  | [ ]  | [ ]  | **22** |  | [ ]  | [ ]  |
| **9** |  | [ ]  | [ ]  | **23** |  | [ ]  | [ ]  |
| **10** |  | [ ]  | [ ]  | **24** |  | [ ]  | [ ]  |
| **11** |  | [ ]  | [ ]  | **25** |  | [ ]  | [ ]  |
| **12** |  | [ ]  | [ ]  | **26** |  | [ ]  | [ ]  |
| **13** |  | [ ]  | [ ]  | **27** |  | [ ]  | [ ]  |
| **14** |  | [ ]  | [ ]  | **28** |  | [ ]  | [ ]  |

Note: Commercial fishing license and permit information is public record. A vessel master has the right to record the crew member's license number or permit ID and no release is necessary to report the information here. EDR submitters can contact ADF&G or CFEC to request license or permit numbers by crewmember name at the contacts below:

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| --- | --- |
| ADF&G – Commercial Crew LicenseLicensing Questions (907) 465-2376 Licensing FAX (907) 465-2440 Licensing Email licensehelp@fishgame.state.ak.us | CFEC - Gear Operator PermitPhone: (907) 790-6921Email: dfg.cfec.questions@alaska.govWebsite: http://www.cfec.state.ak.us/publook/publook.jsp |

**NOTES**