Created: 10/02/14 OMB Control No. 0648-0206 Expiration Date: 12/31/2014

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| C:\Users\pbearden\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\N2SYP1KB\MC900233594[1].wmf | **Pacific Cod**  **Gross Ex-Vessel**  **Volume and Value Report** | http://home.nmfs.noaa.gov/ocioweb/webguide/cdprint/images/logo-noaa.gifU.S. Department of Commerce/NOAA  National Marine Fisheries Service (NMFS)  Sustainable Fisheries Division  P.O. Box 21668  Juneau, Alaska 99802-1668  Telephone: (907) 586-7228  Fax: (907) 586-7465 fax |

**Submit this form On-line Only**

https://alaskafisheries.noaa.gov/webapps/efish/login.

***(shown here for information only)***

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| Each shoreside processor and mothership that accepts deliveries of unprocessed Pacific cod harvested from the BSAI must submit this report electronically to NMFS for the reporting period January 1 to October 31 each year.  **Deadline: no later than November 1 of the year in which the landings were made.** |

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| ***BLOCK A – IDENTIFICATION OF PROCESSOR*** | | | |
| [\_\_] Check here if a Shoreside Processor *and complete #1 and #2* | | | |
| 1. Name of Shoreside Processor | | 2. Federal Processor Permit Number | |
| [\_\_] Check here if a Mothership *and complete #3 and #4* | | | |
| 3. Name of Mothership | | 4. Federal Fisheries Permit Number | |
| 5. Taxpayer ID (Employer ID No. or SSN) | | 6. NMFS Person ID | |
| 7. Business Mailing Address Indicate whether Permanent [\_\_] or Temporary [\_\_] | | | |
| 8. Business Telephone No. | 9. Business Fax No. | | 10. Business E-mail Address |

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| ***BLOCK B – POUNDS PURCHASED AND VALUES PAID*** | | |
| Deliveries by Gear Type | Pounds Purchased  (round weight)  January - October | Total Gross Ex-vessel Value Paid  (US dollars)  January - October |
| Trawl Gear Pacific Cod Deliveries |  |  |
| Fixed Gear Pacific Cod Deliveries |  |  |

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| ***BLOCK C – CERTIFICATION*** | |
| Under penalties of perjury, I declare that I have examined this submission of material, and to the best of my knowledge and belief, the information presented here is true, correct, and complete. | |
| 1. Printed Name of Authorized Representative. *If representative,* ***attach*** *authorization*. | |
| 2. Signature of Authorized Representative | 3. Date |

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.

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***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: NOAA, National Marine Fisheries Service, Alaska Region, 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 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. All information collected is part of a Privacy Act system of records: NOAA #19, Permits and Registrations for United States Federally Regulated Fisheries, published on April 17, 2008 (73 FR 20914).

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| INSTRUCTIONS FOR  **PACIFIC COD EX-VESSEL VOLUME AND VALUE REPORT** |

**Submit this form On-line Only**

https://alaskafisheries.noaa.gov/webapps/efish/login.

***(shown here for information only)***

***GENERAL INFORMATION***

Each shoreside processor and mothership that accepts deliveries of unprocessed Pacific cod harvested from the BSAI and that paid an ex-vessel price to the harvesting vessel for delivering unprocessed Pacific cod caught using fixed or trawl gear is required to submit this report electronically to NMFS no later than November 1 of the year in which the landings were made.

**NOTE:** if no ex-vessel sale occurs (e.g., if the processor accepted fish for special processing), do not include that sale on this form.

Ex-vessel Volume and Value reports will be used when an ex-vessel price is paid to the harvesting vessel for delivering unprocessed Pacific cod caught using either fixed or trawl gear.

This information allows NMFS to collect price data on unprocessed Pacific cod from January 1 to October 31 each year. The information submitted will be summarized to estimate an annual standard ex-vessel price for Pacific cod. Annual Pacific cod shorebased and mothership deliveries of fixed gear and trawl gear ex-vessel prices will be used as a proxy for the fixed gear and trawl gear catcher/processor harvests.

The Amendment 80 Exvessel and Volume Report may be viewed on the Alaska Region website at <http://www.alaskafisheries.noaa.gov/ram>.

When completed, submit the application:

♦ Online at <https://alaskafisheries.noaa.gov/webapps/ifqaccounts/Login>

If you need assistance in completing this form or need additional information, call Sustainable Fisheries Division at (907) 586-7228.

**Note:** It is important that all blocks are completed and all necessary documents are attached. Failure to answer any of the questions or provide attachments could result in delays in the processing of your application.

***COMPLETING THE REPORT***

**BLOCK A - IDENTIFICATION OF PROCESSOR**

If a Shoreside Processor,

1. Name of Shoreside Processor

2. Federal Processor Permit Number

If a Mothership,

3. Name of Mothership

4. Federal Fisheries Permit Number

5. Enter Taxpayer Identification number (EIN or SSN).

6. Enter NMFS person ID.

7. Business Mailing Address, including zip code.

If you check Permanent Address, we will update the database.

If you check Temporary Address, we will use it for this one report and will not change the database.

8-10. Business telephone number, business fax number, including area code, and business e-mail address.

**BLOCK B - POUNDS PURCHASED AND VALUES PAID**

For trawl gear Pacific cod deliveries,

Enter pounds purchased (round weight) during January through October

Enter total gross ex-vessel value paid (US dollars) during January through October

For fixed gear Pacific Cod deliveries,

Enter pounds purchased (round weight) during January through October

Enter total gross ex-vessel value paid (US dollars) during January through October

**BLOCK C - CERTIFICATION**

1. Printed name of the Authorized Representative; if Representative, **attach** authorization.

2. Signature of Authorized Representative.

3. Enter the date the application was signed.