



2014 APPLICATION TO TRANSFER OR CONVERT ANNUAL CATCH ENTITLEMENT (ACE)

Provide all information requested

SUBMIT TO
NE MULTISPECIES ACE TRANSFER PROGRAM
US DEPARTMENT OF COMMERCE, NOAA
NATIONAL MARINE FISHERIES SERVICE
55 GREAT REPUBLIC DRIVE, GLOUCESTER, MA 01930

ACE TRANSFERS BETWEEN SECTORS

Sector Transferring ACE:

Sector Name: _____

Sector Receiving ACE:

Sector Name: _____

Amount (in pounds) of ACE to be transferred, by stock:

_____ : Eastern GB Cod	_____ : American Plaice
_____ : Western GB Cod	_____ : Witch Flounder
_____ : GOM Cod	_____ : GB Winter Flounder
_____ : Eastern GB Haddock	_____ : GOM Winter Flounder
_____ : Western GB Haddock	_____ : SNE/MA Winter Flounder
_____ : GOM Haddock	_____ : Redfish
_____ : GB Yellowtail Flounder	_____ : White Hake
_____ : SNE/MA Yellowtail Flounder	_____ : Pollock
_____ : CC/GOM Yellowtail Flounder	

Total Price Paid for ACE Transfer: _____

Signed: _____
(Transferring Sector Manager)

Dated: _____

Signed: _____
(Receiving Sector Manager)

Dated: _____

ACE CONVERSION WITHIN A SECTOR

Sector Name: _____

Amount (in pounds) of Eastern GB Haddock ACE to be converted to Western GB Haddock ACE:

_____ : Eastern GB Haddock to Western GB Haddock

Signed: _____
(Sector Manager)

Dated: _____

Applications must be received by close of business April 30, 2015.

ACE may be transferred/converted only through the end of the current fishing year and two weeks after the fishing year ends and must be used in accordance with the regulations at 50 CFR 648.87(b)(1)(viii). Please see a summary of conditions and restrictions on the reverse side of this form.

NOTE: If the sector's ACE is exceeded, the sector must cease operations in that stock area until it can acquire additional ACE through a transfer to balance the catch. A sector can resume fishing in the stock area if it acquires more ACE.

This form is required to obtain approval for the transferring of ACE under 50 CFR 648.87(b)(1)(viii) and to monitor ACE allocation and usage for each sector. Signature of this form certifies that sectors comply with limited access permit requirements specified in 50 CFR 648.4, and that the information provided on this form is true, complete and correct to the best of their knowledge, and made in good faith (18 U.S.C. 1001). Making a false statement on this form is punishable by law.

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.

Public reporting burden for this collection of information is estimated to average 5 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the information. Send comments regarding this burden estimate or suggestions for reducing this burden estimate or any other aspect of this collection of information to NMFS, 55 Great Republic Drive, Gloucester MA 01930.

OMB Approval No. 0648-0605
Expires 04/30/2016