

# Wholesale Volume and Value Report1

1U.S. Department of Commerce/NOAA National Marine Fisheries Service (NMFS) Restricted Access Management (RAM) P.O. Box 21668 Juneau, Alaska 99802-1668 (800) 304-4846 toll free / 586-7202 (907) 586-7354 fax



### Submit this form On-line Only https://alaskafisheries.noaa.gov/webapps/efish/login. (shown here for information only)

Each catcher/processor that harvests species (excluding Pacific cod, halibut and fixed gear sablefish) allocated under Amendment 80 or Western Alaska Community Development Quota (CDQ) is required to 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.

\* Except for rock sole which is only required to be report from January 1 through March 31

1BLOCK A – IDENTIFICATION OF PROCESSOR					
11. Name of Catcher/processor		2. Federal Fisheries Permit Number			
		4 Endowel Fishewing Deverte Number			
3. Name of Other type of processor, if applicable		4. Federal Fisheries Permit Number			
5. Taxpayer ID (Employer ID No. or SSN)		6. NMFS Person ID			
7. Business Mailing Address <u>Permanent</u> [ ] or <u>Temporary</u> [ ]					
8. Business Telephone No.	9. Business Fax No.		10. Business E-mail Address		

#### **BLOCK B – POUNDS LANDED AND VALUES RECEIVED**

Deliveries by Gear Type	Species Code	Pounds Landed (round weight)	Wholesale Gross Value Received (US dollars)
Trawl Gear	BSAI Arrowtooth Flounder		
Trawl Gear	AI Atka mackerel		
Trawl Gear	AI POP		
Trawl Gear	BSAI Sablefish		
Trawl Gear	BSAI Flathead Sole		
Trawl Gear	BSAI Yellowfin Sole		
Trawl Gear	BS Greenland Turbot		
Fixed Gear	BSAI Arrowtooth Flounder		
Fixed Gear	BS Greenland Turbot		
All Gear Types	Fish Meal (includes all of the above species)		

Deliveries by Gear Type	Species Code	Pounds Landed (round weight)	Wholesale Gross Value Received (US dollars)
Trawl Gear	BSAI Rock Sole (Jan – Mar)		
Trawl Gear	BSAI Rock Sole (April – Dec)		

# **1BLOCK C – CERTIFICATION**

IDLOCK 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.				
11. Printed Name of Shoreside Processor or Mothership or 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.

#### **1PUBLIC REPORTING BURDEN STATEMENT**

Public reporting burden for this collection of information is estimated to average 1 minute 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).

# INSTRUCTIONS FOR AMENDMENT 80 EX-VESSEL VOLUME AND VALUE REPORT

### Submit this form On-line Only https://alaskafisheries.noaa.gov/webapps/efish/login. (shown here for information only)

# **1GENERAL INFORMATION**

Wholesale Volume and Value reports are used for directed fisheries where fish are harvested exclusively, or almost exclusively, by catcher/processors and where insufficient ex-vessel prices data is available. These species include all groundfish species (except Pacific cod, pollock, and fixed-gear sablefish) allocated to the Amendment 80 and CDQ Program.

NMFS relies on the information provided in the Wholesale Volume and Value report to estimate the ex-vessel value of those species. The first arm's length transaction that occurs under these conditions is the first wholesale price or first market price. The Magnuson-Stevens Act mandates that cost recovery fees be based on the ex-vessel value of fish. Give that there is no reliable ex-vessel price generated for some species, that price must be estimated. This report must be submitted electronically to NMFS no later than November 1 of the year in which the landings were made.

The Amendment 80 Wholesale Volume and Value Report is available on the Alaska Region website at <u>http://www.alaskafisheries.noaa.gov/ram</u>.

When completed, submit the application:

• Online at <a href="https://alaskafisheries.noaa.gov/webapps/ifqaccounts/Login">https://alaskafisheries.noaa.gov/webapps/ifqaccounts/Login</a>

If you need assistance in completing this form or need additional information, call Restricted Access Management (RAM) at (800) 304-4846 (Option #2) or (907) 586-7202 (Option #2).

**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**

- 1-2. Name of catcher/processor and Federal Processor Permit Number, if applicable.
- 3-4. Name of other type of processor and Federal Fisheries Permit Number, if applicable.
  - 5. Enter Taxpayer Identification number (EIN or SSN).
  - 6. Enter NMFS person ID.
  - 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 RAM database.
- 8-10. Business telephone number, business fax number, including area code, and business e-mail address.

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

# All values must be the total for landings from January 1 through October 31, except role sole which will be reported from January 1 through March 31 and then again from April 1 through October 31.

#### Pounds Purchased (round weight)

Enter the total weight of the species that was deducted from the Amendment 80 or CDQ account. If the species was processed into fish meal, the round weight should be included under the fish meal row and not the actual species.

#### Total Gross First Wholesale Value Received

Enter the total gross first wholesale value, in U.S. dollars, for that species and time period. If the species was processed into fish meal, the first wholesale value should be included under the fish meal row and not the actual species.

#### **Retro-payments**

The total U.S. dollar amount of any species retro-payments made in the current year to vessels for landings made during the previous calendar year;

#### **BLOCK C - CERTIFICATION**

- 1. Printed name of the Shoreside Processor or Mothership or the Authorized Representative; if Representative, **attach** authorization.
- 2. Signature of Authorized Representative.
- 3. Enter the date the application was signed.