

U.S. Department of Commerce, NOAA
 NMFS PERMITS OFFICE, F/SER14
 263 13th Avenue South
 St. Petersburg, FL 33701
 Toll Free 877-376-4877 (8:00 a.m. - 4:30 p.m. ET)
 727-824-5326 (8:00 a.m. - 4:30 p.m. ET)
 sero.nmfs.noaa.gov/permits



FEDERAL PERMIT APPLICATION FOR AN ANNUAL DEALER PERMIT

<p>FOR OFFICE USE ONLY</p> <p>Application ID</p>

FOR OFFICE USE ONLY	
Reviewer's Initials and Date	
Check or Money Order Number and Amount	
SERO Dealer Number	
Non Compliance Hold Date	
Non Compliance Cleared Date	
Expiration Date	

Include a copy of the State Wholesale/Dealer license for each state where product will be first received from the commercial fisherman/vessel. The name shown on your State Wholesale License(s) and your Federal Dealer permit must match in ownership. The information provided below is only for businesses that are not sole proprietorships. Sole Proprietors should continue to Section 2 and will provide their ownership information in Section 3. Please provide the name below as it appears on the State Wholesale License. The date formed is referring to the date in which the business was formed. The FEIN is the number that was provided to you by the IRS (if applicable).

SECTION 1 - DEALER INFORMATION

Dealer is (check one):

<input type="checkbox"/> S Corporation	<input type="checkbox"/> Cooperative	<input type="checkbox"/> Partnership	<input type="checkbox"/> Sole Proprietorship (Continue to Section 2)
<input type="checkbox"/> C Corporation	<input type="checkbox"/> Limited Liability Co.	<input type="checkbox"/> Other _____	

Provide the name below as it appears on the state wholesale or dealer license and the FEIN provided by the IRS (if applicable). The date of incorporation is the date the business was created. The information provided in this section should be a business, not an individual.

Dealer's Name **Is this a DBA name?** Yes No
If Dealer is NOT a Sole Proprietorship

If yes, What is the DBA name? **Federal Tax Identification Number (FEIN)** **Date Business Formed (mm/dd/yyyy)**

Area Code **Phone Number** **E-Mail Address**

Mailing Address	Apt #	City	State	County/Parish	Zip Code	Country
<input style="width: 250px;" type="text"/>	<input style="width: 30px;" type="text"/>	<input style="width: 100px;" type="text"/>	<input style="width: 30px;" type="text"/>	<input style="width: 100px;" type="text"/>	<input style="width: 60px;" type="text"/>	<input style="width: 60px;" type="text"/>

Check box if the Physical Address is the same as the mailing address.

Physical Address (PO Box not acceptable)	Apt #	City	State	County/Parish	Zip Code	Country
<input style="width: 250px;" type="text"/>	<input style="width: 30px;" type="text"/>	<input style="width: 100px;" type="text"/>	<input style="width: 30px;" type="text"/>	<input style="width: 100px;" type="text"/>	<input style="width: 60px;" type="text"/>	<input style="width: 60px;" type="text"/>

SECTION 2 - PERMITS

Indicate which permit(s) you are applying for by checking the box adjacent to the corresponding fishery. Also indicate if this is a new or renewal of a permit.

	NEW	RENEW	
Gulf of Mexico and South Atlantic Dealer (GSAD)	<input type="checkbox"/>	<input type="checkbox"/>	FEE SCHEDULE 1 Permit = \$50.00 2 Permits = \$62.50 3 permits = \$75.00
Atlantic Shark (SK) <small>(Includes the Gulf of Mexico and U.S. Caribbean)</small>	<input type="checkbox"/>	<input type="checkbox"/>	
Domestic Swordfish (SD) <small>(Includes the Gulf of Mexico and U.S. Caribbean)</small>	<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 3 - OWNER AND OFFICER INFORMATION

Provide information on all persons associated with the Dealer. If there are two owners on the wholesale license listed please use the additional box for the joint owner information. If more than two people are on the wholesale license, please make a copy of Section 3 and provide the additional names and information. If a business owns a percentage of the dealer, use Section 4 to provide the officer/shareholder/owner information.

Primary Owner:
 Sole Owner Co-Owner Percent of Business Owned

Position Held - Check ALL That Apply
 President/CEO Vice President Secretary Treasurer Director/ Manager Other/Shareholder

Are you of Hispanic, Latino, or Spanish origin? Yes No

What is your race? (Check all that apply)
 White American Indian or Alaska Native Native Hawaiian or Other Pacific Islander
 Black or African American Asian American Other _____

Last Name **First Name** **Middle Name** **Suffix - Jr, Sr, etc.**

Tax ID Number (SSN) **Date of Birth (MM/DD/YYYY)** **Area Code** **Phone Number**

Mailing Address **Apt #** **City** **State** **County/Parish** **Zip Code** **Country**

Check box if the Physical Address is the same as the mailing address.

Physical Address (PO Box not acceptable) **Apt #** **City** **State** **County/Parish** **Zip Code** **Country**

Email Address

Additional Ownership:
 Sole Owner Co-Owner Percent of Business Owned

Position Held - Check ALL That Apply
 President/CEO Vice President Secretary Treasurer Director/ Manager Other/Shareholder

Are you of Hispanic, Latino, or Spanish origin? Yes No

What is your race? (Check all that apply)
 White American Indian or Alaska Native Native Hawaiian or Other Pacific Islander
 Black or African American Asian American Other _____

Last Name **First Name** **Middle Name** **Suffix - Jr, Sr, etc.**

Tax ID Number (SSN) **Date of Birth (MM/DD/YYYY)** **Area Code** **Phone Number**

Mailing Address **Apt #** **City** **State** **County/Parish** **Zip Code** **Country**

Check box if the Physical Address is the same as the mailing address.

Physical Address (PO Box not acceptable) **Apt #** **City** **State** **County/Parish** **Zip Code** **Country**

Email Address

SECTION 4 – BUSINESSES AS OWNERS and OFFICER/SHAREHOLDER INFORMATION

Provide information on all persons associated with the dealer that are business officers/shareholders/owners. If another business is a co-owner and/or shareholder of the dealer listed in Section 1, please mark business in the additional ownership box and provide that business's officers/shareholders/owners on another copy of Section 4 if applicable. Please indicate the percentage of each person listed and their ownership/and or position to the business/dealer. If an entity owns less than 1 percent of the dealer (minor shareholder), indicate this at the end of the section and include the total percentage held by minor shareholders. The percentages of ownership in the Dealer must total 100 percent.

Additional Ownership:
 Joint Ownership **Business** — provide Business Name in last name **Percent of Business Owned**

Position Held - Check ALL That Apply
 President/CEO Vice President Secretary Treasurer Director/ Manager Other/Shareholder

Are you of Hispanic, Latino, or Spanish origin? Yes No

What is your race? (Check all that apply)
 White American Indian or Alaska Native Native Hawaiian or Other Pacific Islander
 Black or African American Asian American Other _____

Last Name **First Name** **Middle Name** **Suffix - Jr, Sr, etc.**

Tax ID Number (SSN), or if a Business (FEIN) **Date of Birth (MM/DD/YYYY)** **Area Code** **Phone Number**

Mailing Address **Apt #** **City** **State** **County/Parish** **Zip Code** **Country**

Check box if the Physical Address is the same as the mailing address.

Physical Address (PO Box not acceptable) **Apt #** **City** **State** **County/Parish** **Zip Code** **Country**

Email Address

Additional Ownership:
 Joint Ownership **Business** — provide Business Name in last name **Percent of Business Owned**

Position Held - Check ALL That Apply
 President/CEO Vice President Secretary Treasurer Director/ Manager Other/Shareholder

Are you of Hispanic, Latino, or Spanish origin? Yes No

What is your race? (Check all that apply)
 White American Indian or Alaska Native Native Hawaiian or Other Pacific Islander
 Black or African American Asian American Other _____

Last Name **First Name** **Middle Name** **Suffix - Jr, Sr, etc.**

Tax ID Number (SSN), or if a Business (FEIN) **Date of Birth (MM/DD/YYYY)** **Area Code** **Phone Number**

Mailing Address **Apt #** **City** **State** **County/Parish** **Zip Code** **Country**

Check box if the Physical Address is the same as the mailing address.

Physical Address (PO Box not acceptable) **Apt #** **City** **State** **County/Parish** **Zip Code** **Country**

Email Address

Minor Shareholder Information
 MINOR SHAREHOLDERS - Check here if one or more shareholders individually holds shares that is less than 1% of the total business shares. TOTAL PERCENTAGE of the business shares held by minor shareholder(s)

SECTION 5 - RECEIVING FACILITIES

List the names and physical addresses for facilities where product is received (fish is off loaded from the fishing vessels). Please copy this page as needed to provide information on all facilities where fish are received. If you receive product in different states, you must provide a copy of your valid State Wholesale License for each state.

Check here if a location where you receive product from fishermen is the same as the physical address from section 1 or for sole proprietors in section 2. If checked, you do not need to re-list that location here.

Facility Name				Area Code	Phone Number		
Physical Address (PO Box not acceptable)	Apt #	City	State	County/Parish	Zip Code	Country	

Facility Name				Area Code	Phone Number		
Physical Address (PO Box not acceptable)	Apt #	City	State	County/Parish	Zip Code	Country	

Facility Name				Area Code	Phone Number		
Physical Address (PO Box not acceptable)	Apt #	City	State	County/Parish	Zip Code	Country	

Facility Name				Area Code	Phone Number		
Physical Address (PO Box not acceptable)	Apt #	City	State	County/Parish	Zip Code	Country	

Facility Name				Area Code	Phone Number		
Physical Address (PO Box not acceptable)	Apt #	City	State	County/Parish	Zip Code	Country	

Facility Name				Area Code	Phone Number		
Physical Address (PO Box not acceptable)	Apt #	City	State	County/Parish	Zip Code	Country	

Facility Name				Area Code	Phone Number		
Physical Address (PO Box not acceptable)	Apt #	City	State	County/Parish	Zip Code	Country	

Facility Name				Area Code	Phone Number		
Physical Address (PO Box not acceptable)	Apt #	City	State	County/Parish	Zip Code	Country	

SECTION 6—SMALL BUSINESS CERTIFICATION

Please use the following tool to determine if you are classified as a small business and check the appropriate box below. Check only one box.

When proposing regulations, the National Marine Fisheries Service (NMFS) is required to analyze the economic effects of such regulations on small entities (e.g., businesses). As part of the required analyses, NMFS must determine if permit applicants are big or small entities according to standards established by the Small Business Administration (SBA) or NMFS. Only one standard applies to each entity. For businesses, the standard is based on their primary North American Industry Classification System (NAICS) code, which indicates the industry the business is primarily engaged in. The SBA also has established "principles of affiliation" to determine whether a business concern is "independently owned and operated." In general, businesses are affiliates of each other when one business controls or has the power to control the other business or a third party controls or has the power to control both.

- We are a small organization that is a nonprofit enterprise that is independently owned and operated and is not dominant in its field.
- We are a business primarily involved in harvesting seafood (NAICS 114111, 114112, or 114119) that is independently owned and operated, not dominant in its field of operation (including its affiliates), and has total annual gross receipts less than \$11 million for all its affiliated operations worldwide.
- We are a business primarily involved in providing for-hire (charter, party/headboat) fishing services (NAICS 487210) that has total annual gross receipts less than \$7.5 million for all its affiliated operations worldwide.
- We are a business is primarily involved in buying and selling seafood (NAICS 424460) that is independently owned and operated, not dominant in its field of operation, and employs 100 or fewer persons on a full time, part time, temporary, or other basis, at all its affiliated operations world-wide.
- Our business is primarily involved in processing seafood (NAICS 311710). It is independently owned and operated, not dominant in its field of operation, and employs 750 or fewer persons on a full time, part time, temporary, or other basis, at all its affiliated operations world- wide.
- Our business is primarily involved in some other industry. Please refer to SBA's list of size standards by NAICS code (see https://www.sba.gov/sites/default/files/files/Size_Standards_Table.xlsx) to determine if your business is small. Check the box if your business is small according to the applicable size standards for your primary industry.
- YES, we marked one of the above boxes and we are a small business or organization.
- NO, we did not mark one of the above boxes and are a big business or organization.

If you have any questions about these standards or the definition of affiliation, please contact Mike Travis, SERO Economist, at mike.travis@noaa.gov or call 727-209-5982.

SECTION 7 - SIGNATURE FOR APPLICATION - REQUIRED

The undersigned certifies under penalty of perjury that the foregoing information is true and correct (28 U.S.C. section 1746; 18 U.S.C. section 1621; 18 U.S.C. section 1001).

Please note: The applicant who signs below must be the dealer identified in Section 1 unless the dealer is a partnership, corporation, or other business entity, in which the applicant must be an individual named as an officer or shareholder of the business as listed in Section 4.

Applicant Signature

Date

Printed Name

Position In Company (if applicable)

Payment Reminder:

All applications must include payment of a non-refundable application fee in the form of a check or money order made payable to the U.S. Treasury. The fee required is \$50.00 for the first permit and \$12.50 for each additional permit requested with this application.

Public reporting burden for this collection of information is estimated to average 29 minutes per response, including the time for reviewing 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 suggestions for reducing this burden to: PRA Officer, National Marine Fisheries Service, F/SER26, 263 13th Avenue South, St. Petersburg, FL 33701.

The National Marine Fisheries Service requires this information for the conservation and management of marine fishery resources. The data reported will be used to develop, implement, and monitor fishery management activities for a variety of other uses. Responses to this collection are required to obtain or retain a fisheries permit under the Magnuson - Stevens Act. Non-confidential information may be released via a NOAA Fisheries website. Non-confidential information means: Name, Street Address, City, State, Zip Code, Effective Date of Permit, Permit Types, Vessel Name, Vessel Identification Number, and in the case of a "for hire" vessel the Passenger Capacity, or individual, corporate and lease holders of permits. All other data submitted will be handled as confidential material in accordance with NOAA Administrative Order 216-100, Protection of Confidential Fishery Statistics. Notwithstanding any other provisions of the law, no person is required to respond to, nor shall any person be subjected 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.



Federal Annual Dealer Permit Application Instructions

Rev 10/23/2015

General Instructions:

In addition to the instructions provided, applicants with specific questions are encouraged to contact the Permits Office at (727) 824-5326 or toll free at (877) 376-4877 between 8:00 a.m. and 4:30 p.m. ET. Applicants are encouraged to visit the Southeast Region Permits Office website at sero.nmfs.noaa.gov/permits.

Please consult the U.S. Code of Federal Regulations whose guidance for application requirements, permit eligibilities, and related information will always prevail. Access to the U.S. Code of Federal Regulations is available on line at sero.nmfs.noaa.gov/sustainable_fisheries/policy_branch.

Federal regulations require a permit holder to report any permit information change to NMFS, in writing, within 30 days.

1. Complete all applicable sections of this application form. All application fields should be typed or printed in ink. NMFS will return incomplete or illegible applications.
2. The application fee is **\$50 for one permit and \$12.50 for each additional permit** and is **non-refundable**. NMFS will not refund money for denied permits. A check or money order payable to the **U.S. TREASURY** must accompany each application.

FEE SCHEDULE FOR DEALER PERMITS:

1 = \$50.00 2 = \$62.50 3 = \$75.00

3. Mail the application, payment, and all required supporting documentation to: **National Marine Fisheries Service (F/SER14), 263 13th Avenue South, St. Petersburg, FL 33701**. All permits are mailed via US Postal Service. If you want your permit and associated documents returned overnight, enclose an addressed pre-paid label and envelope. Note: FedEx, UPS, and most other commercial carriers do not deliver to PO Boxes. *Using a prepaid overnight delivery option does not expedite permit processing; it only expedites delivery of your completed permit package.*
4. Atlantic Shark Dealers must submit a copy of a valid Atlantic Shark Identification Workshop certificate for each place of business listed on the shark dealer permit. The certificate must be either a SHARK DEALER OWNER - SHARK IDENTIFICATION WORKSHOP CERTIFICATE or a SHARK DEALER PROXY - SHARK IDENTIFICATION WORKSHOP CERTIFICATE. If you have submitted a copy of your certificate(s) and it is not expired, you do not have to resubmit the document(s). For information about Shark Identification Workshops, contact the NMFS Highly Migratory Species Division at (301) 713-2347.

Please note – SHARK DEALER PROXY CERTIFICATE is only valid for a permit renewal and NMFS will not accept it for a new permit.

APPLICATION SECTION 1 -DEALER INFORMATION.

Indicate the dealer's type of business. If the dealer is a **Sole Proprietorship** continue to section 2. If the dealer is a partnership, corporation, or other business entity, print or type the name of the business as shown on the State Wholesale License and enter all other information required. See business definitions below.

Definition of Business Types¹:

S Corporation: An S corporation is a special type of corporation created through an IRS tax election. An eligible domestic corporation can avoid double taxation (once to the corporation and again to the shareholder(s)) by electing to

be treated as an S corporation. An S corporation is a corporation with the Subchapter S designation from the IRS.

C Corporation: A C corporation is an independent legal entity owned by shareholders. This means that the corporation itself, not the shareholders that own it, is held legally liable for the actions and debts the business incurs.

Cooperative: A cooperative is a business or organization owned by and operated for the benefit of those using its services. Profits and earnings generated by the cooperative are distributed among the members, also known as user-owners..

Limited Liability Company (LLC): A limited liability company (LLC) is a hybrid type of legal structure that provides the limited liability features of a corporation and the tax efficiencies and operational flexibility of a partnership. The "owners" of an LLC are referred to as "members." Depending on the state, the members can consist of a single individual (one owner), two or more individuals, corporations or other LLCs.

Partnership: A partnership is a business where two or more individuals, businesses, or other organizations share ownership. Each partner contributes to all aspects of the business, including money, property, labor or skill. In return, each partner shares in the profits and losses of the business.

Sole Proprietorship: A sole proprietorship is the simplest and most common structure chosen to start a business. It is an unincorporated business owned and run by one individual with no distinction between the business and the individual who is the owner. The owner is entitled to all profits and are responsible for all your business's debts, losses and liabilities.

Other: If the dealer is some other type of business or organization not listed above (e.g., a trust), please check the **Other** box and enter the type of business or organization on the line next to the box.

APPLICATION SECTION 2 - PERMITS

Select the permits you are applying for. As of August 7, 2014, a dealer who receives the following fish is required to hold an annual Federal Gulf of Mexico and South Atlantic Dealer permit (GSAD):

Atlantic Dolphin / Wahoo	South Atlantic Snapper-Grouper
South Atlantic Golden Crab	South Atlantic Wreckfish
Gulf of Mexico Reef Fish	South Atlantic Rock Shrimp
Spiny Lobster	Mackerel

Under U.S. Code of Federal Regulations Title 50 section 635.4, a dealer who receives sharks or swordfish are required to hold the applicable Highly Migratory Species Dealer permit.

APPLICATION SECTION 3 - OWNER AND OFFICER INFORMATION

Indicate the primary owner of the dealer. Percentage of owners must equal 100%.

- If **Sole Proprietorship** was checked in **Section 1**, check **Sole Owner** and complete the information in the box.
- If **Co-Owner** is checked, fill a box for each individual who owns a portion of the dealer. Include the position held, personal information, mailing, and physical address.
- If a separate business owns all or part of the dealer in **Section 1**, enter the business information in **Section 4**.

Information on race will provide NMFS social scientists a better understanding of possible social impacts from regulatory change on specific groups of business owners, specifically minority business owners, within the Southeast Region. This information will allow for better identification of minority business owners who may be the subject of environmental justice, fairness, and equity issues within fisheries management in the Southeast Region. If you have any questions or concerns about the collection of this information, please contact Mike Jepson or Christina Package-Ward at [727-824-5305](tel:727-824-5305).

APPLICATION SECTION 4 – BUSINESS AS OWNERS and OFFICER/SHAREHOLDER INFORMATION

Use this section if a business owns all or part of the dealer in **Section 1**. Fill out information for additional owner/shareholders. Repeat if additional businesses are partial owners. Ownership information and **Percent of Business Owned** for each business involved must equal 100%. Disregard ethnicity question if owner is a business.

For businesses, provide information on the officers/shareholders. Check **Joint Ownership** if individual listed in the box is an owner of the secondary business. Use **Section 4** to input all the officer and shareholders of additional businesses. If additional space is needed, please copy **Section 4** as many times as necessary to provide information on all officers/shareholders associated with business.

APPLICATION SECTION 5 – RECEIVING FACILITIES

Provide information for each physical location where fish are received. The “physical facility” must be the dealer’s brick and mortar facility. It cannot be a marina, boat ramp, dock, or other place where the boat unloads fish unless the dealer owns or leases that marina, boat ramp, dock, or other place. **A Post Office Box is not an acceptable physical location to receive fish.**

If your receiving facility is the same the physical address in **Section 1** because you are a **Sole Proprietor**, it is not necessary to list it again in **Section 5**.

APPLICATION SECTION 6 – SMALL BUSINESS CERTIFICATION

Check the appropriate box and answer the question whether or not the primary business is considered a small business.

In preparing rulemakings related to permitted fisheries, the National Marine Fisheries Service (NMFS) is required to analyze the economic effect of such regulations. As part of the required analyses, NMFS must determine if permit and dealers participating in the fishery are big or small businesses as defined by the US Small Business Administration (SBA).

SBA has established size criteria for all major industry sectors in the US, including fish harvesting and fish processing businesses. The SBA also has established “principles of affiliation” to determine whether a business concern is “independently owned and operated.” In general, business concerns are affiliates of each other when one concern controls or has the power to control the other or a third party controls or has the power to control both. Providing this invaluable information allows NMFS economists during the analysis of economic impact and to better manage fisheries.

If you have any questions about these standards or the definition of affiliation, please call Southeast Regional Economist Mike Travis at 727-209-5982.

APPLICATION SECTION 7 – SIGNATURE FOR APPLICATION

The applicant must sign and date the application. The signatory must be an officer or shareholder if the dealer is a corporation, partnership, or other business entity.

KNOWINGLY SUPPLYING FALSE INFORMATION TO OBTAIN A DEALER PERMIT IS A VIOLATION OF FEDERAL LAW PUNISHABLE BY A FINE AND/OR IMPRISONMENT.

Public reporting burden for this collection of information is estimated to average 29 minutes per response, including the time for reviewing 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 suggestions for reducing this burden to: PRA Officer, National Marine Fisheries Service, F/SER26, 263 13th Avenue South, St. Petersburg, FL 33701.

The National Marine Fisheries Service requires this information for the conservation and management of marine fishery resources. The data reported will be used to develop, implement, and monitor fishery management activities for a variety of other uses. Responses to this collection are required to obtain or retain a fisheries permit under the Magnuson - Stevens Act. Non-confidential information may be released via a NOAA Fisheries website. Non-confidential information means: Name, Street Address, City, State, Zip Code, Effective Date of Permit, Permit Types, Vessel Name, Vessel Identification Number, and in the case of a “for hire” vessel the Passenger Capacity, or individual, corporate and lease holders of permits. All other data submitted will be handled as confidential material in accordance with NOAA Administrative Order 216-100, Protection of Confidential Fishery Statistics. Notwithstanding any other provisions of the law, no person is required to respond to, nor shall any person be subjected 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.

¹ According to the US Small Business Administration. For more information, please visit www.sba.gov.

Addendum to the Dealer Application Instructions regarding Implementation of the Gulf and South Atlantic Dealer Permit

Dealer permits cannot be renewed until all logbook reporting requirements have been met.

Reporting Instructions for Gulf and South Atlantic Dealer (GSAD) Permit Holders

- Reporting through the state's electronic trip ticket program will fulfill the Federal reporting requirement; however the submission button (e.g. "Send to Federal" vs. "Send to State"), the federally required reporting periods, and the timeliness of transmissions may be different than those of your state.
- Federal periods are weekly, from Sunday 12:01 am to Saturday 11:59 pm (unless stated otherwise). Federal regulations require landings data to be transmitted and received prior to midnight on the Tuesday following the end of any period.
- "Transmitted" would be the successful sending of data (landings or notification of no purchases) from the Trip Ticket software or through SAFIS. If reports were not received from your dealership by NOAA (of purchases or "No Activity") for any period(s), then your Gulf and South Atlantic Dealer (GSAD) permit will be considered "invalid". *A dealer with an invalid GSAD permit may not receive federally managed species from federally permitted vessels and will not be renewed by the SERO permit office.*
- Once all reports have been received by NOAA Fisheries, the GSAD permit will again be considered valid and these limitations will no longer exist.

Missing Reports

- Missing reports should be (re)transmitted electronically to be brought back into compliance. If no landings occurred during the dates listed above, please submit a "Negative Report" for that period. Regulations state that GSAD dealers delinquent with reports are prohibited from receiving fish from federally permitted vessels until all required reports have been submitted and received by NOAA Fisheries. Once all required reports have been received by NOAA Fisheries, the GSAD dealer is again eligible to receive federally regulated fish, as described in 50 CFR 622.5 (c)(1)(iv), from federally permitted vessels.
- Take a look at the reporting status webpage. Check and see which periods have reports received and processed by SEFSC and which periods are missing reports: <http://www.sefsc.noaa.gov/drsr/> (updated every morning).
- If reports have been submitted but are not being properly accounted, please contact the Southeast Fisheries Science Center at the SEFSC/Fisheries Monitoring Branch; Bluefin Data for Trip Ticket Programs; or if you use another program your state contact at the State Trip Ticket Office (contact information below).
- If not currently reporting electronically, please see information below and:
- http://www.sefsc.noaa.gov/fisheries/dealers.htm#Coastal_Seafood_Fisheries_Dealers.
- If you prefer to receive this notice by email, please contact sefsc.logbook@noaa.gov from the email address in which you would like to receive this information. We have implemented an electronic notification system to better inform dealers of the status of their dealer reports for missing periods.

For additional information and reporting specifics for states in the Southeast Region, please contact your state trip ticket office.