OMB Control No. 0648-0741, Expires on: XX/XX/XXXX

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| **Widow Rockfish Reallocation Application**  **Pacific Coast Groundfish**  **Individual Fishing Quota** | noaalogo  **UNITED STATES DEPARTMENT OF COMMERCE**  **National Oceanic and Atmospheric Administration**  **National Marine Fisheries Service, West Coast Region**  ***Fisheries Permits Office***  7600 Sand Point Way NE, Bldg. 1  Seattle, WA 98115-0070  *Phone* (206) 526-4353 *Fax* (206) 526-4461 www.westcoast.fisheries.noaa.gov |

**INSTRUCTIONS**

This form must be completed and submitted to the National Marine Fisheries Service (NMFS) to apply for reallocated widow rockfish quota shares (QS). This application, including any required supplemental documentation, must be postmarked or hand delivered to the address given above no later than **xx, 2016**. An application postmarked or hand delivered after that date will not be considered or reviewed by NMFS. This is a one-time opportunity to apply for reallocated widow rockfish QS.

**Section A – Applicant Information**Only an owner of an original (non-shorebased whiting processor) QS permit, or a new QS permit to which NMFS administratively transferred widow rockfish QS based on a U.S. Court Order, is eligible to receive reallocated widow rockfish QS. NMFS has prefilled the applicant information that we have on file for each QS permit owner in order to make the application process more efficient and provide the information NMFS already has on record. If any of the information provided by NMFS in Section A is not correct, please correct the information by crossing it out and writing in the correct information. Please complete any blank fields (note: fax number and email are optional fields).   
  
**Section B – Preliminary Reallocated Widow Rockfish QS Amount**NMFS has prefilled Section B with the preliminary widow rockfish reallocation amount for each limited entry trawl permit that contributed to the QS permit’s history, and the total preliminary amount that would be reallocated to the QS permit owner. The preliminary reallocated amounts were calculated consistent with the formulas given in 50 CFR 660.140. The amounts are provided on a preliminary basis and are subject to change. Attached please find workbooks that show the calculation for each limited entry trawl permit. The data used in the calculation of the reallocation represents the best available data and is subject to change based on other information received by NMFS during the application process. The source of the data used in the calculation of the QS and IBQ for each species/species group was the relevant PacFIN dataset on July 27, 2016. The applicant must review these values in Section B order to determine whether they accept or do not accept the reallocation amount in Section C.

**Section C – Acceptance or Non-Acceptance of Preliminary Reallocated Widow Rockfish QS Amount**   
In order for the application to be complete, the applicant must certify that they either accept or do not accept the preliminary reallocated widow rockfish QS amount given in Section B and the calculations provided on the attached summaries for each species/species group. You must check the appropriate box in Section C.

If the applicant does not accept in part or whole the calculation of reallocated widow rockfish QS, they must provide a letter with the application, and the letter and application must be submitted by the deadline date. The letter must describe which parts the applicant believes are inaccurate and must provide credible information to substantiate any corrections requested by the applicant. Requests for corrections may only be made for errors in NMFS’ use or application of data, including: errors in NMFS’ use or application of landings data from PacFIN, errors in NMFS’ application of the reallocation formula, or errors in identification of the QS permit owner, permit combinations, or vessel registration as listed in the NMFS permit database. The accuracy of the data given in the relevant PacFIN dataset as of July 27, 2016 may not be corrected.

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| **Section A – Applicant Information** | | | |
| 1. QS Permit Number | 2. Trawl-Endorsed Limited Entry Permit Number(s) That Make Up QS Permit History | | |
| 3. QS Permit Owner Name | | | 4. TIN (if business) or DOB (if person) |
| 5. State Registered In (if business) |
| 6. Business Mailing Address  *Street or PO Box* | | | 7. Business Phone Number  ( ) |
| 8. Business Fax Number (*optional*)  ( ) |
| *City* | *State* | *Zip Code* | 9. Business Email (*optional*) |

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| **Section B – Preliminary Reallocated Widow Rockfish QS Amount** | |
| **Trawl-Endorsed Limited Entry Permit Number** | **Reallocated Widow Rockfish QS Amount** |
| GFXXXX | 0.000% |
| GFXXXX | 0.000% |
| GFXXXX | 0.000% |
| GFXXXX | 0.000% |
| GFXXXX | 0.000% |
| GFXXXX | 0.000% |
| **Total:** | **0.000%** |

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| **Section C – Acceptance or Non-Acceptance of Preliminary Reallocated Widow Rockfish QS Amount** | |
| Please indicate your acceptance or non-acceptance of your preliminary reallocated widow rockfish QS amount below. Please mark only one box next to the statement that applies to you, then sign and date below.  **[ ]** **I ACCEPT** the preliminary reallocated widow rockfish QS amount as given in Section B, and the supporting data and calculations used by NMFS to determine these preliminary allocations. I understand that this preliminary reallocation amount is subject to change.  **[ ]** **I DO NOT ACCEPT**, in whole or part, preliminary reallocated widow rockfish QS amount as given in Section B. With this application, I will provide in writing which part of NMFS’ calculation is not accurate and requires correction. I will provide copies of relevant credible information to support my request for correction with this application. I understand that this is my only opportunity to request a correction as part of this application. | |
| *Under penalties of perjury, I hereby declare that I, the undersigned, am authorized to certify this application on behalf of the applicant and completed this form, and the information contained herein is true, correct, and complete to the best of my knowledge and belief.* | |
| Signature of Authorized Representative | Date |

**WARNING STATEMENT:** A false statement on this form is punishable by permit sanctions (revocation, suspension, or modification) under 15 CFR Part 904, a civil penalty up to $100,000 under 16 USC 1858, and/or criminal penalties including, but not limited to, fines or imprisonment or both under 18 USC 1001.

**PRIVACY ACT STATEMENT: Authority:** The collection of this information is authorized under the Magnuson-Stevens Fishery Conservation and Management Act, 16 U.S.C 1801 et seq. The authority for the mandatory collection of the Tax Identification Number (TIN) is 31 U.S.C. 7701. **Purpose:** As a method to manage U.S. fisheries, the NOAA National Marine Fisheries Service (NMFS) has issued quota shares for a portion of catch to fishermen in the United States. Information on NOAA Fisheries quota share applicants and renewing holders includes account contact information, date of birth, and TIN. **Routine Uses:**  The Department will use this information to determine quota share accounts and to identify fishery participants. Disclosure of this information is permitted under the Privacy Act of 1974 (5 U.S.C. Section 552a**)**, to be shared within NMFS offices, in order to coordinate monitoring and management of sustainability of fisheries and protected resources, as well as with the applicable State or Regional Marine Fisheries Commissions and International Organizations. Disclosure of this information is also subject to all of the published routine uses as identified in the Privacy Act System of Records Notice [COMMERCE/NOAA-19](http://www.osec.doc.gov/opog/PrivacyAct/SORNs/noaa-19.html), Permits and Registrations for the United States Federally Regulated Fisheries. **Disclosure:**  Furnishing this information is voluntary; however, failure to provide complete and accurate information will prevent the determination of eligibility for quota shares.

**PRA STATEMENT:** Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing the instructions, reviewing the enclosed calculations, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other suggestions for reducing this burden to NOAA/National Marine Fisheries Service, West Coast Region, Attn: Program Manager, Sustainable Fisheries Division, 7600 Sand Point Way NE, Seattle, WA 98115. 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.