OMB Control No. 0648-0785, Expiration Date: 05/31/2020

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| **Electronic Monitoring Authorization Application and Renewal Form**  **Pacific Coast Groundfish**  **Trawl Rationalization Program** | 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](http://www.westcoast.fisheries.noaa.gov) |

**INSTRUCTIONS**

This form must be completed and submitted to the National Marine Fisheries Service (NMFS) at the address given above to obtain or renew an electronic monitoring (EM) authorization.

**New EM Authorization**

To receive an EM authorization, vessel owners must complete a two-step application process:

1) Initial application

2) EM installation and final application

Step 1: Initial Application

Complete and submit this application form to NMFS at the address given above. NMFS will use this form and the eligibility criteria below to determine your initial eligibility to receive an EM authorization. If NMFS determines that the applicant meets the eligibility criteria, NMFS will notify you applicant in writing that the initial application has been accepted for further consideration. You may then install an EM system on your vessel and proceed with submission of a final application in Step 2.

*Eligibility Criteria*

1. The applicant owns the vessel proposed to be used;
2. The vessel has a valid Pacific Coast Groundfish limited entry, trawl-endorsed permit registered to it;
3. If participating in the mothership sector, the vessel has a valid MS/CV endorsement;
4. The vessel is participating in the Pacific whiting IFQ fishery, mothership sector, or the Shorebased IFQ sector using groundfish non-trawl gear;
5. The vessel is able to accommodate the EM system, including providing sufficient uninterrupted electrical power, suitable camera mounts, adequate lighting, and fittings for hydraulic lines to enable connection of a pressure transducer;
6. The vessel owner and operator are willing and able to comply with all applicable requirements of this section and to operate under a NMFS-accepted vessel monitoring plan.

Step 2: Final Application

When NMFS notifies you of your initial eligibility, you may install an EM system and submit a final application to NMFS at the address given above. A final application must include:

1. An updated application form if any updates are necessary.
2. An EM System Certification Form (completed by EM service provider)
3. An Individual Vessel Monitoring Plan (VMP)

NMFS may request additional information or revisions from the applicant until NMFS is satisfied that the application is complete. If NMFS determines that the applicant has met the requirements, NMFS will issue an Initial Administrative Determination (IAD) and an EM Authorization. If the application is denied, the IAD will provide an explanation of the denial in writing.

The EM system must be from a NMFS-permitted EM service provider and must meet the performance standards below. A list of permitted EM service providers, the above forms, and guidelines for completing a VMP are available on the West Coast Region’s website: <http://www.westcoast.fisheries.noaa.gov/fisheries/groundfish_catch_shares/electronic_monitoring.html>

*EM System Specifications*

The specifications (e.g., image resolution, frame rate, user interface) and configuration of an EM system and associated equipment (e.g., number and placement of cameras, lighting) must be sufficient to:

1. Allow easy and complete viewing, identification, and quantification, of catch items discarded at sea, including during low light conditions;
2. Continuously record vessel location (latitude/longitude coordinates), velocity, course, and sensor data (i.e, hydraulic and winch activity);
3. Allow the identification of the time, date, and location of a haul/set or discard event;
4. Record and store image data from all hauls/sets and the duration that fish are onboard the vessel until offloading begins;
5. Continuously record and store raw sensor data (i.e., GPS and gear sensors) for the entire fishing trip;
6. Prevent radio frequency interference (RFI) with vessel monitoring systems (VMS) and other equipment;
7. Allow the vessel operator to test and monitor the functionality of the EM system prior to and during the fishing trip to ensure it is fully functional;
8. Prevent tampering or, if tampering does occur, show evidence of tampering; and,
9. Provide image and sensor data in a format that enables their integration for analysis.

*Vessel Monitoring Plan Components*

The vessel monitoring plan must contain the following information. Additional guidance and templates are available on the West Coast Region’s website: <http://www.westcoast.fisheries.noaa.gov/fisheries/groundfish_catch_shares/electronic_monitoring.html>

The VMP must include descriptions of the following (using pictures and diagrams where appropriate):

1. General vessel information including the vessel name, hull number, gear type(s), home port, captain name, and target fishery or sector;
2. The coordinates of the home port box, if a geo-referenced port box will be used to trigger data collection;
3. A diagram of the vessel layout with measurements of the deck and denoting the location of any designated discard control points;
4. The number and location of cameras and with images of corresponding views;
5. The location of lighting, control center, GPS, sensors, monitor, and other EM equipment;
6. Frame rates, image resolution, frequency of data logging, sensor trigger threshold values, and other EM system specifications;
7. The location and procedures for any catch handling, including designated discard control points within camera view, procedures for sorting and measuring discards, the number of crew sorting catch, and what steps will be taken to ensure that all catch remains in camera view;
8. The measurements of all bins, baskets, compartments, and other tools that will be used to calculate estimates of weight;
9. The detailed steps that will be taken to minimize the potential for EM system malfunctions and the steps will be taken, when malfunctions occur, to ensure the adequate monitoring of catch;
10. The name, address, phone number, and email address of a primary point of contact for vessel operations;
11. The name, address, and phone number of the vessel’s EM service provider, and contact information for a primary point of contact at the EM service provider;
12. The name, address, phone number, and signature of the applicant, and the date of the application; and,
13. Any other information required by the EM Program Manager.

**EM Authorization Renewal**

An EM authorization must be renewed annually. NMFS will mail a pre-filled version of this form along with the most recent version of the vessel’s VMP, to existing EM authorization holders each year on or about: September 1 for non-trawl shorebased IFQ vessels and January 1 for Pacific whiting IFQ and MS/CV vessels. The vessel owner is responsible for reviewing the enclosed information, making corrections where appropriate, and updating their tentative fishing plans for the coming year. Signed forms and VMPs must be returned to NMFS by **October 15** for non-trawl shorebased IFQ vessels and **February 15** for Pacific whiting IFQ and MS/CV vessels, to be automatically renewed for the following authorization period.

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| **Section A – Vessel Owner (Applicant) Information** | | | |
| 1. Vessel Name | | | 2. Vessel Registration Number |
| 5. Vessel Owner Name | | | 4. Home Port (*City, State*) |
| 6. Mailing Address (*PO Box not acceptable*)  *Street* | | | 7. Phone Number  ( ) |
| 8. Fax Number (*optional*)  ( ) |
| *City* | *State* | *Zip Code* | 9. Email |
| 3. Gear Type(s) To Be Used With EM in Trawl Fishery (check all the apply)  Midwater trawl Bottom trawl Fish trap/pot Longline If other, please specify:  ­­\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |

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| **Section B – Vessel Operator Information *(Primary Skipper)*** | | | |
| 1. Vessel Operator Name | | | 3. Phone Number  ( ) |
| 2. Mailing Address (*PO Box not acceptable*)  *Street* | | | 4. Fax Number (*optional*)  ( ) |
| 5. Email |
| *City* | *State* | *Zip Code* |  |

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| **Section B – Vessel Operator Information *(Secondary Skipper)***  **If no secondary skipper, state “N/A”** | | | |
| 1. Vessel Operator Name | | | 3. Phone Number  ( ) |
| 2. Mailing Address (*PO Box not acceptable*)  *Street* | | | 4. Fax Number (*optional*)  ( ) |
| 5. Email |
| *City* | *State* | *Zip Code* |  |
| **Section C – Other Authorized Representative**  **In this section, you may designate another individual, such as a cooperative manager, to have access to the vessel’s EM data and drive reports.** | | | |
| 1. Name | | | 3. Phone Number  ( ) |
| 2. Mailing Address (*PO Box not acceptable*)  *Street* | | | 4. Fax Number (*optional*)  ( ) |
| 5. Email |
| *City* | *State* | *Zip Code* |  |

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| **Section D – Eligibility** | | |
| To use EM, the vessel and vessel owner and operator must meet the following eligibility criteria. Please respond to the following questions to indicate your eligibility.  **Please Note: All of the questions below must be answered for the application to considered complete**. If you cannot affirm any of these statements or are unsure, check “No.” Any “No” answers to these questions may disqualify your vessel from using EM. | | |
| *Does the applicant own the vessel proposed to be used?* | **Yes** | **No** |
| *Is the vessel able to accommodate the EM system including providing sufficient uninterrupted electrical power, suitable camera mounts, adequate lighting, and fittings for hydraulic lines to enable connection of a pressure transducer?* | **Yes** | **No** |
| *Are the vessel owner and operator willing and able to comply with all applicable requirements of this section and to operate under a NMFS-accepted vessel monitoring plan?* | **Yes** | **No** |

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| **Section E – Tentative Fishing Plan** | | | | | |
| Vessels carrying EM may be required to carry an observer if requested by NOAA. Vessels needing to carry an observer are required to provide notice to the observer program 48 hours before a fishing trip (Call 866-780-8064). To make sure that NMFS trains enough observers and deploys them in the right ports, NMFS needs to know when and where vessels will be using EM and observers. In addition, this information will be given to observer providers to use in planning observer availability in ports for your use. Please indicate below your tentative plans to participate in the Trawl Program next calendar year. **This information is not binding, but must be a good faith estimate.** | | | | | |
| **Gear/Sector** | **Port** | **Date**  **Begin End** | | **Monitoring**  *(check one)* | |
| ***Pacific whiting, shorebased IFQ*** |  |  |  | **Observer** | **EM** |
| ***Pacific whiting, MS/CV*** |  |  |  | **Observer** | **EM** |
| ***Midwater trawl, non-whiting shorebased IFQ*** |  |  |  | **Observer** | **EM** |
| ***Bottom trawl, shorebased IFQ*** |  |  |  | **Observer** | **EM** |
| ***Non-trawl, shorebased IFQ pot gear*** |  |  |  | **Observer** | **EM** |
| ***Non-trawl, shorebased IFQ hook gear*** |  |  |  | **Observer** | **EM** |
| *Other* |  |  |  | **Observer** | **EM** |
| *Other* |  |  |  | **Observer** | **EM** |

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| **Section F – Certification of Applicant**  **This section must be completed by a notary to certify that the individual(s) have satisfactorily identified themselves.** | |
| By signing and dating the form below, the applicant or authorized representative certifies that all information set forth in the form is true, correct and complete to the best of the applicant’s knowledge or belief. The form will not be considered without the applicant or authorized representative’s signature. NMFS may request that the authorized representative for a business entity include a copy of the corporate resolution or other document authorizing the individual to sign and certify on behalf of the business entity.  *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 |
| Printed Name of Authorized Representative | |

**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:** Some of the information collection described above is confidential under section 402(b) of the Magnuson-Stevens Act and under NOAA Administrative Order 216-100, Protection of Confidential Fisheries Statistics. TIN, DOB, business phone number, fax number, email and contents of the cooperative agreement are not released to the public. The information collected is part of a Privacy Act System of Records, COMMERCE/NOAA #19, Permits and Registrations for United States Federally Regulated Fisheries. An amended notice was published in the Federal Register on August 7, 2015 (80 FR 47457) and became effective on September 15, 2015 (80 FR 55327).

**PRA STATEMENT:** A Federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with an information collection subject to the requirements of the Paperwork Reduction Act of 1995 unless the information collection has a currently valid OMB Control Number. The approved OMB Control Number for this information collection is 0648-0785. Without this approval, we could not conduct this information collection. Public reporting for this information collection is estimated to be approximately 8.67 hours per response for new applicants (with preparation of the vessel monitoring plan and EM unit installation) and 0.5 hours per response for re-registering applicants, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the information collection. All responses to this information collection are mandatory per 50 CFR 660.600. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to the NOAA/National Marine Fisheries Service, West Coast Region, Attn: Program Manager, Sustainable Fisheries Division, 7600 Sand Point Way NE, Seattle, WA 98115.