

	<p><b>Application For SUBSISTENCE HALIBUT REGISTRATION CERTIFICATE (SHARC) ALASKA NATIVE TRIBE</b></p>	<p>U.S. Dept of Commerce/NOAA National Marine Fisheries Service Restricted Access Management P.O. Box 21668 Juneau, Alaska 99802-1668 (800) 304-4846 toll free / 586-7202 in Juneau; (907) 586-7354 fax</p> 
<p>Only persons who are members of an Alaska Native tribe as defined in 50 CFR 300.65 may be issued a tribal SHARC.</p> <p><b><i>Alaska Native tribe</i></b> means, for purposes of the subsistence fishery for Pacific halibut in waters in and off Alaska, a federally recognized Alaska Native tribe that has customary and traditional use of halibut and that is listed in 50 CFR 300.65(g)(2). <b>A tribal SHARC may not be issued to anyone who is not a member of an Alaska Native tribe as defined in 50 CFR 300.65(g)(2).</b></p> <p>Incomplete applications will result in delayed processing. Unsigned applications will not be processed.</p>		

<b>BLOCK A – ALASKA NATIVE TRIBE</b>	
1. Name of Alaska Native Tribe ( <i>as defined at 50 CFR 300.65(g)(2)</i> ):  	
2. Business Mailing Address:  	3. Telephone Number:  
4. E-mail Address:  	

<b>BLOCK B – ALASKA TRIBAL MEMBER(S) INFORMATION</b>	
1. Name of Tribal Member (first, middle, last):  	2. Date of Birth:  
3. Daytime Telephone Number:  	
4. E-mail Address:  	5. Community or Area of Residence ( <i>if Area, Describe the Location</i> )  
6. Permanent Mailing Address ( <i>P.O. box number, street, city, state, zip code</i> ):  	
7. Are you applying for a new SHARC or a renewal of an existing SHARC? <input type="checkbox"/> New <input type="checkbox"/> Renewal  If a renewal, enter current SHARC number: _____	

**BLOCK B – ALASKA TRIBAL MEMBER(S) INFORMATION**

1. Name of Tribal Member (first, middle, last):	2. Date of Birth:  3. Daytime Telephone Number:
4. E-mail Address:	5. Community or Area of Residence (if Area, Describe the Location)
6. Permanent Mailing Address (P.O. box number, street, city, state, zip code):      	
7. Are you applying for a new SHARC or a renewal of an existing SHARC? <input type="checkbox"/> New <input type="checkbox"/> Renewal  If a renewal, enter current SHARC number: _____	

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1. Name of Tribal Member (first, middle, last):	2. Date of Birth:  3. Daytime Telephone Number:
4. E-mail Address:	5. Community or Area of Residence (if Area, Describe the Location)
6. Permanent Mailing Address (P.O. box number, street, city, state, zip code):      	
7. Are you applying for a new SHARC or a renewal of an existing SHARC? <input type="checkbox"/> New <input type="checkbox"/> Renewal  If a renewal, enter current SHARC number: _____	

BLOCK B – ALASKA TRIBAL MEMBER(S) INFORMATION	
1. Name of Tribal Member (first, middle, last):	2. Date of Birth:  3. Daytime Telephone Number:
4. E-mail Address:	5. Community or Area of Residence <i>(if Area, Describe the Location)</i>
6. Permanent Mailing Address ( <i>P.O. box number, street, city, state, zip code</i> ):      	
7. Are you applying for a new SHARC or a renewal of an existing SHARC? <input type="checkbox"/> New <input type="checkbox"/> Renewal  If a renewal, enter current SHARC number: _____	

BLOCK C – CERTIFICATION OF TRIBAL OFFICIAL	
<i>I certify that all the person(s) listed on this registration application are members of the above-named “Alaska Native Tribe” as defined at 50 CFR 300.65(g)(2).</i>	
1. Signature of Tribal Official ( <i>First, Middle, Last</i> ):	2. Date:
3. Print Name of Official:	4. Official’s Title:

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#### ***PUBLIC REPORTING BURDEN 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 0648-0512. Without this approval, we could not conduct this information collection. Public reporting for this information collection is estimated to be approximately 30 minutes per response, 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 required to obtain a permit. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to Assistant Regional Administrator, Sustainable Fisheries Division, Alaska Region, NMFS, P.O. Box 21688. Juneau, AK 99802-1668.

#### ***PRIVACY ACT STATEMENT***

**Authority:** The collection of this information is authorized under the Northern Pacific Halibut Act of 1982, 16 U.S.C. 773c.

**Purpose:** NMFS is collecting this information to manage the Subsistence Halibut Program.

**Routine Uses:** NMFS will use this information to determine the eligibility of the applicant to receive a tribal subsistence halibut registration certificate (SHARC) and to issue the SHARC if the application is approved. Responses to this information request are confidential under section 402(b) of the Magnuson-Stevens Act. They are also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics. Disclosure of this information is permitted under the Privacy Act of 1974 (5 U.S.C. Section 552a) to be shared among authorized staff for work-related purposes. Disclosure of this information is also subject to the published routine uses identified in the Privacy Act System of Records Notice [COMMERCE/NOAA-19](#), Permits and Registrations for the United States Federally Regulated Fisheries.

**Disclosure:** Furnishing this information is required to obtain or retain benefits. Failure to provide complete and accurate information may delay or prevent an eligible person from receiving a tribal SHARC.

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Instructions  
SUBSISTENCE HALIBUT REGISTRATION CERTIFICATE (SHARC)  
ALASKA NATIVE TRIBE

***PROGRAM INFORMATION***

The Subsistence Halibut Fishery is authorized by Federal regulations at 50 CFR part 300 and provides for eligible persons to conduct subsistence halibut fishing in Convention waters off Alaska.

***Subsistence halibut***

means halibut caught by a rural resident or a member of an Alaska Native tribe for direct personal or family consumption as food, sharing for personal or family consumption as food, or for customary trade.

***Eligible persons*** are residents of particular rural communities or rural areas and all identified members of federally recognized Alaska Native tribes.

***Alaska Native tribe*** means, for purposes of the subsistence fishery for Pacific halibut in waters in and off Alaska, a federally recognized Alaska Native tribe that has customary and traditional use of halibut and that is listed in 50 CFR 300.65(g)(2).

***GENERAL INFORMATION***

If you have questions when completing the application, please—

- call RAM at (800) 304-4846 (select option 2) or (907) 586-7202 (select option 2);
- fax RAM at (907) 586-7354;
- e-mail your questions to [RAM.Alaska@noaa.gov](mailto:RAM.Alaska@noaa.gov); or
- check our web site at <https://www.fisheries.noaa.gov/alaska/sustainable-fisheries/subsistence-halibut-fishing-alaska>.

Please allow at least 10 days for processing your SHARC. If you would like to have your SHARC sent by a method other than regular mail, please attach a note indicating the method, and follow the appropriate procedure below.

Complete the application and—

Mail to: **NMFS, Alaska Region  
Restricted Access Management (RAM)  
P.O. Box 21668  
Juneau, Alaska 99802-1668**

Deliver to: **Federal Building  
709 W. 9th Street, Suite 713  
Juneau, Alaska 99801**

Or fax to: **907- 586-7354.**

**Express Mail**

If you would like to have your SHARC sent to you by U.S. Postal Express Mail, send us an express mail envelope with the correct amount of postage prepaid or send express mail stamps UNATTACHED to an envelope.

**NOTE:** If the express mail envelope you send is too small or the postage attached is less than the amount required, your SHARC will be sent to you by regular U.S. mail.

**Other Express Carriers**

If you would like to have your SHARC sent to you by a private express carrier (e.g., Federal Express, UPS, DHL), submit your account number and name of carrier or a prepaid envelope with the permit application.

***COMPLETING THE APPLICATION***

**BLOCK A– ALASKA NATIVE TRIBE**

1. Enter the name of the Alaska Native tribe that qualifies you as eligible to fish for subsistence halibut. This tribe must be one of the Alaska Native tribes listed in 50 CFR 300.65(g)(2).
2. Enter the permanent business mailing address. The tribal members' SHARCs will be sent to this address.
3. Enter the daytime business telephone number, including area code.
4. Enter the e-mail address.

**BLOCK B – TRIBAL MEMBER(S) INFORMATION (*duplicate form as needed*)**

Enter the following information for each tribal member:

1. Name of tribal member (first, middle, and last name). Please include any suffixes such as Jr., Sr., etc.
2. Date of birth (month/day/year).
3. Daytime telephone number. Include area code.
4. Community or area of residence (city and state, or describe the location within the area). A description may include such information as latitude and longitude if known or direction and distance from a landmark or from a milepost on a road. List the current community or area of residence even if it is not one of the eligible rural communities listed in 50 CFR 300.65(g)(1) or eligible rural areas listed in 50 CFR 300.65(g)(3).
5. Permanent mailing address, including P.O. box, street, state, and zip code.
6. Please indicate whether the tribal member is applying for a new SHARC or a renewal of an existing SHARC. If a renewal, please list their current SHARC number in the space provided.

**BLOCK C – CERTIFICATION OF TRIBAL OFFICIAL**

- 1–2. The tribal official must sign and date the application. The tribal official's signature certifies that the persons listed on this registration application are members of the above-named Alaska Native tribe as defined at 50 CFR 300.65(f)(2) and that all information contained in the application is true, correct, and complete to the best of your knowledge and belief.
- 3–4. Print name and title of official.