

U.S. DEPT OF COMMERCE, NOAA
 NMFS Catch Shares Program, F/SER29
 263 13th Avenue South
 St. Petersburg, FL 33701-5511
 Toll Free 866-425-7627 (8 a.m. - 4:30 p.m. ET)
 727-824-5305 (8 a.m. - 4:30 p.m. ET)
<https://SECatchShares.fisheries.noaa.gov/>



**NOAA FISHERIES SERVICE
 FEDERAL APPLICATION
 FOR CATCH SHARES
 ONLINE ACCOUNT**

FOR OFFICE USE ONLY
Reviewer's Initials and Date _____
Sanction Case Number if Sanctioned and date held _____
Date Sanction Released and Initials _____
Application ID

APPLICATION INSTRUCTIONS

1. Current Catch Share participants need to complete this application to certify they are or are NOT a United States citizen or a permanent resident alien.
2. This application is to establish a Catch Share Online account for new participants and update account information for existing participants. **However, a valid commercial permit for Gulf reef fish and allocation are required to possess (at and after the time of the advance notice of landing), land or sell Gulf reef fish subject to this Catch Share program.**
3. Follow the instructions at the top of each section. Make sure all the information is correct then sign and date the application below. The Catch Share applicant signing the application must be an account holder listed in section 1 and a United States citizen or permanent resident alien.
4. Mail your completed application to: **U.S. Department of Commerce, NOAA, National Marine Fisheries Service F/SER29, 263 13th Avenue South, St. Petersburg, FL 33701-5505.**

Public reporting burden for this collection of information is estimated to average 13 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/SER2, 263 13th Avenue South, St. Petersburg, FL 33701-5505.

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 uses. Responses to this collection are required to obtain or retain a Catch Shares online account under the Magnuson-Stevens Act. Non-confidential information will be released via a NOAA Fisheries Service website. Non-confidential information means: name, address, city, state, zip code, etc. 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.

SIGNATURE OF APPLICATION

The undersigned certifies under penalty of perjury that the foregoing information is true and correct (28 USC 1746; 18 USC 1621; 18 USC 1001, 16 USC 1857). Knowingly supplying false information for the purpose of obtaining a Catch Shares Online Account is a violation of Federal law punishable by a fine and/or imprisonment. Please note: The individual signing below **MUST** be either the Catch Shares account holder OR must be one of the officers or shareholders that is a United States citizen or permanent resident alien listed in section 2 of this application.

Applicant Signature _____ **Position in Company** (if applicable) _____

Print Name _____ **Date** _____ **UserID** _____
 (if applicable)

1. CATCH SHARES ONLINE ACCOUNT HOLDER INFORMATION

- 1) Check the appropriate box below if the applicant is a new or existing Catch Shares online account holder. Provide the USER ID for an existing account holder.
- 2) Complete this page for all Catch Shares online account holders. If the account holder is a business, enter the Federal ID number and date the business filed with the state. If the account holder is an individual, enter their Social Security Number and date of birth.
- 3) Check the appropriate box below to certify that the applicant IS or IS NOT a United States citizen or permanent resident alien.
- 4) **If the Catch Shares account is held by a business, please also complete Section 2 on page 4.**

Check the appropriate box below:

- NEW** Catch Shares online account holder
- EXISTING** Catch Shares online account holder and provide the Catch Shares Online account holder's UserID: _____

E-mail address: _____

CATCH SHARES ONLINE ACCOUNT HOLDER INFORMATION

Check one: Individual/Sole Proprietorship Joint Ownership Partnership Corporation
 Other _____

Certify Citizenship Status:

- The applicant **IS** a United States citizen or permanent resident alien **OR** this Business was properly established by the laws of the United States or any state of the United States.
- The applicant **IS NOT** a United States citizen or permanent resident alien **OR** this Business was not properly established by the laws of the United States or any state of the United States.

What is this individual's sex? Male Female

In this individual of Hispanic, Latino, or Spanish origin? Yes No

What is this individual's race? White American Indian or Alaska Native Native Hawaiian or Other Pacific Islander
 Black or African American Asian American Other: _____

Prefix	Last Name or Business Name	First Name	Middle Name	Suffix

If you are operating under a different name, what is your Doing Business As (DBA) name?

Mailing Address	Apt/Suite	City	State	County/Parish	Zip Code	Country

Physical Address

Check if same as mailing address

Apt/Suite	City	State	County/Parish	Zip Code	Country

Tax ID number (FED ID or SSN)	Date of Birth or Date Business Filed (mm/dd/yyyy)	Area Code	Primary Phone Number

Select one: Home Work Cell

ADDITIONAL CATCH SHARES ONLINE ACCOUNT HOLDER INFORMATION

- 1) **Only complete this page for all additional Catch Shares online account holders.** If the account holder is a business, enter the Federal ID number and date the business filed with the state. If the account holder is an individual, enter their Social Security Number and date of birth.
- 2) Check the appropriate box below to certify that the applicant IS or IS NOT a United States citizen or permanent resident alien.

Catch Shares online account holder's UserID (if applicable): _____

ADDITIONAL CATCH SHARES ONLINE ACCOUNT HOLDER INFORMATION

Check one: Individual/Sole Proprietorship Joint Ownership Partnership Corporation

Other _____

Certify Citizenship Status:

The applicant **IS** a United States citizen or permanent resident alien **OR** this Business was properly established by the laws of the United States or any state of the United States.

The applicant **IS NOT** a United States citizen or permanent resident alien **OR** this Business was not properly established by the laws of the United States or any state of the United States.

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In this individual of Hispanic, Latino, or Spanish origin? Yes No

What is this individual's race? White American Indian or Alaska Native Native Hawaiian or Other Pacific Islander
 Black or African American Asian American Other: _____

Prefix	Last Name or Business Name	First Name	Middle Name	Suffix

If you are operating under a different name, what is your Doing Business As (DBA) name?

--

Mailing Address	Apt/Suite	City	State	County/Parish	Zip Code	Country

Physical Address

Check if same as mailing address

Apt/Suite	City	State	County/Parish	Zip Code	Country

Tax ID number (FED ID or SSN)	Date of Birth or Date Business Filed (mm/dd/yyyy)	Area Code	Primary Phone Number

Select one: Home Work Cell

ADDITIONAL CATCH SHARES ONLINE ACCOUNT HOLDER INFORMATION

- 1) **Only complete this page for all additional Catch Shares online account holders.** If the account holder is a business, enter the Federal ID number and date the business filed with the state. If the account holder is an individual, enter their Social Security Number and date of birth.
- 2) Check the appropriate box below to certify that the applicant IS or IS NOT a United States citizen or permanent resident alien.

Catch Shares online account holder's UserID (if applicable): _____

ADDITIONAL CATCH SHARES ONLINE ACCOUNT HOLDER INFORMATION

Check one: Individual/Sole Proprietorship Joint Ownership Partnership Corporation
 Other _____

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Check if same as mailing address

Apt/Suite	City	State	County/Parish	Zip Code	Country

Tax ID number (FED ID or SSN)	Date of Birth or Date Business Filed (mm/dd/yyyy)	Area Code	Primary Phone Number

Select one: Home Work Cell

2. OFFICER/SHAREHOLDER INFORMATION FOR CORPORATION/BUSINESS/LLC THAT HOLD THE CATCH SHARES ONLINE ACCOUNT

1) **If this Catch Shares online account is held by a business, then complete this section for EACH officer or partner associated with the business.**

Provide the information for **all** officers or partners that are shown on your most recent annual report. If your business is structured as a corporation, identify all shareholders in the corporation that own at least 1% or more of the shares, as well as the percentage of all shares in the corporation held by each shareholder. Individuals holding less than 1% of the shares (minor shareholders) should not be individually listed. **Total shareholders must equal 100%.** For all provide position held in business, name, address, social security number, date of birth, and telephone number.

2) **Check the appropriate box below to certify that the applicant is or is NOT a United States citizen or permanent resident alien.**

Business name _____ **Federal Tax ID number** _____

Officer or Shareholder Information

Check **all** that apply: President/CEO Vice President Secretary Treasurer Director/Manager Other _____
 Shareholder **Percent (%) of corporation held:** _____

Certify Citizenship Status:
 The applicant **IS** a United States citizen or permanent resident alien.
 The applicant **IS NOT** a United States citizen or permanent resident alien.

What is this individual's sex? Male Female

In this individual of Hispanic, Latino, or Spanish origin? Yes No

What is this individual's race? White American Indian or Alaska Native Native Hawaiian or Other Pacific Islander
 Black or African American Asian American Other: _____

Prefix	Last Name	First Name	Middle Name	Suffix			
Mailing Address		Apt/Suite	City	State	County/Parish	Zip Code	Country
Physical Address							
<input type="checkbox"/> Check if same as mailing address		Apt/Suite	City	State	County/Parish	Zip Code	Country
SSN		Date of Birth (mm/dd/yyyy)		Area Code	Primary Phone Number		
Select one: Home <input type="checkbox"/> Work <input type="checkbox"/> Cell <input type="checkbox"/>							

_____ **MINOR SHAREHOLDERS** - Check here if one or more of your shareholders each individually hold shares that total less than 1% of the total shares of the corporation/business/LLC. For example, there might be three shareholders whose total shares added together is 2% of the total shares but each shareholder individually only holds 0.66% of the shares.

_____ **TOTAL PERCENTAGE (%)** of corporation/business/LLC held by *minor* shareholder(s) that individually holds less than 1% of the total shares of the corporation/business/LLC.

ADDITIONAL OFFICER/SHAREHOLDER INFORMATION FOR CORPORATION/BUSINESS/LLC THAT HOLD THE CATCH SHARES ONLINE ACCOUNT

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Shareholder Percent (%) of corporation held: _____

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<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
Mailing Address		Apt/Suite	City	State	County/Parish	Zip Code	Country
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Physical Address							
<input type="checkbox"/> Check if same as mailing address		Apt/Suite	City	State	County/Parish	Zip Code	Country
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
SSN	Date of Birth (mm/dd/yyyy)			Area Code	Primary Phone Number		
<input type="text"/>	<input type="text"/>			<input type="text"/>	<input type="text"/>		
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<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Physical Address							
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Prefix	Last Name	First Name	Middle Name	Suffix			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
Mailing Address		Apt/Suite	City	State	County/Parish	Zip Code	Country
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Physical Address							
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SSN	Date of Birth (mm/dd/yyyy)			Area Code	Primary Phone Number		
<input type="text"/>	<input type="text"/>			<input type="text"/>	<input type="text"/>		
Select one: Home <input type="checkbox"/> Work <input type="checkbox"/> Cell <input type="checkbox"/>							

_____ **MINOR SHAREHOLDERS** - Check here if one or more of your shareholders each individually hold shares that total less than 1% of the total shares of the corporation/business/LLC. For example, there might be three shareholders whose total shares added together is 2% of the total shares but each shareholder individually only holds 0.66% of the shares.

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SMALL BUSINESS OR ORGANIZATION CERTIFICATION

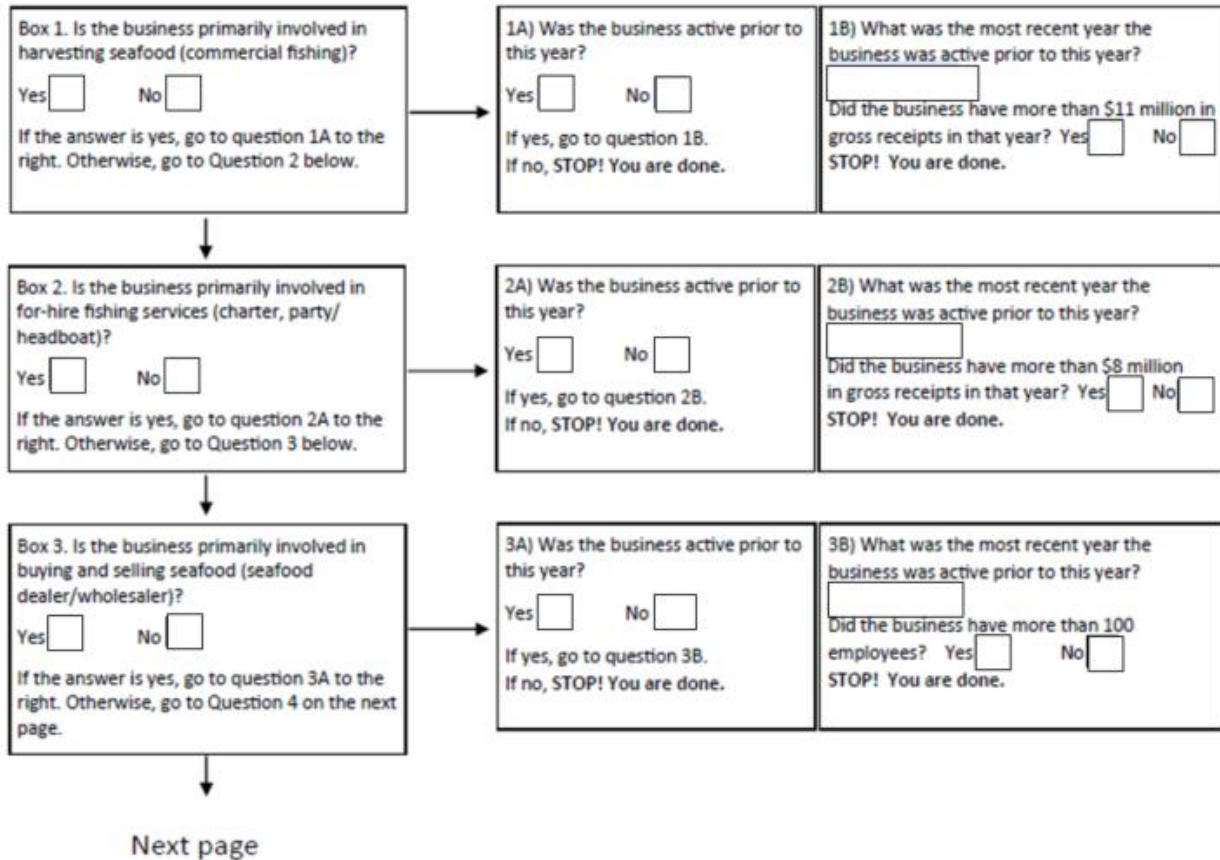
(All applicants must complete this section)

- For vessels that are leased, complete this section for the business(es)/organization(s) that *lease the vessel*.
- For vessels that are not leased, complete this section for the business(es)/organization(s) that own the vessel (i.e., the business(es)/organization(s) that appear on the vessel's USCG documentation or state registration).

Business name _____ **Federal Tax ID number** _____

Information needed to complete this section: Please estimate your annual gross revenues (sales) for the most recent calendar year your business or organization was active prior to this year. Your primary activity is the activity that generated the greatest percentage of annual gross revenues in the most recent complete calendar year the business or organization was active. Review the business/organization descriptions in Boxes 1 through 7 and identify the one that describes the applicant's primary activity. If the business is primarily a seafood dealer or processor, estimate the number of employees for the most recent calendar year your business or organization was active prior to this year. Include all full-time, part-time, and temporary employees in your estimate, but do not include crew that work on any vessels owned by the business or organization or its affiliates. Your estimates should account for the revenues and employees of ALL businesses and organizations with which your business or organization is affiliated. See the instructions at the beginning of the application package for more information about affiliation. **If you have questions about affiliation and how it applies in your case, please call 727-824-5305 and ask for one of our Office's economists.**

How to fill out the form: Start with Box 1. If the answer to the question in Box 1 is "Yes," check "Yes" and answer the questions in the box to the right and follow the instructions in that box. If the answer to Question 1 is "No," check "No" and go to Box 2. Continue this process until you have either: (1) answered "Yes" to ONE of the questions in Boxes 1 through 6 AND the applicable questions in the boxes to the right, OR (2) answered all questions in Box 7.



SMALL BUSINESS OR ORGANIZATION CERTIFICATION

(Continued from previous page)

<p>Box 4. Is the business primarily involved in processing seafood (seafood processor)?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If the answer is yes, go to question 1A to the right. Otherwise, go to Question 5.</p>	<p>4A) Was the business active prior to this year?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, go to question 4B. If no, STOP! You are done.</p>	<p>4B) What was the most recent year the business was active prior to this year?</p> <p><input style="width: 100px;" type="text"/></p> <p>Did the business have more than 750 employees? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>STOP! You are done.</p>
↓		
<p>Box 5. Is the organization an Environmental, Conservation and Wildlife, or Professional Non-Profit Organization?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If the answer is yes, go to question 5A to the right. Otherwise, go to Question 6 below.</p>	<p>5A) Was the organization active prior to this year?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, go to question 5B. If no, STOP! You are done.</p>	<p>5B) What was the most recent year the organization was active prior to this year?</p> <p><input style="width: 100px;" type="text"/></p> <p>Did the organization have more than \$15 Million in gross receipts? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>STOP! You are done.</p>
↓		
<p>Box 6. Is the organization some other Non-Profit Organization (e.g., business association)?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If the answer is yes, go to question 6A to the right. Otherwise, go to Question 7 below.</p>	<p>6A) Was the organization active prior to this year?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, go to question 6B. If no, STOP! You are done.</p>	<p>6B) What was the most recent year the business was active prior to this year?</p> <p><input style="width: 100px;" type="text"/></p> <p>Did the organization have more than \$7.5 Million in gross receipts? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>STOP! You are done.</p>
↓		
<p>7) The business or organization must be primarily involved in another industry not related to fishing or seafood. Refer to SBA's list of NAICS codes (see https://go.usa.gov/xRGvQ) and enter the NAICS code for your primary activity here: <input style="width: 200px;" type="text"/></p> <p>Based on the applicable SBA size standard, check the appropriate box to indicate if the business or organization is Large or Small and report the year on which that conclusion was based.</p> <p>Large <input type="checkbox"/> Small <input type="checkbox"/> Year: <input style="width: 50px;" type="text"/> STOP! You are done.</p>		