FIRST RECEIVER SITE LICENSE APPLICATION FORM

PACIFIC COAST GROUNDFISH INDIVIDUAL FISHING QUOTA 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) at the address given above to apply or re-register for a first receiver site license (FRSL). A FRSL authorizes a buyer to receive, purchase, or take custody or control of an IFQ landing at the physical location of the facility given on the license. To complete the application process, any Economic Data Collection surveys due from the FRSL applicant must be deemed complete by the NOAA/Northwest Fisheries Science Center. The applicant must also submit supplemental documentation, described below. A first receiver site license is effective upon approval by NMFS.

Section A – First Receiver Site License Applicant Information

The applicant must provide the state and number of the state buyer/dealer license, and the legal name of the first receiver site license applicant as it will appear on the fish ticket. The buyer/dealer license must be issued by the state in which the receiving site is located as given in Section B. A copy of the state buyer/dealer license must be included with the application. Provide the tax identification number if the first receiver is a business entity or date of birth if an individual. Please provide the business mailing address, phone number, fax number and email address. NMFS will mail all pertinent information to the address of record, and NMFS will only store one address of record for each group. Please provide the name of contact person for NMFS to communicate with about the first receiver site license.

Section B - Site Information (Physical Location of Receiving Facility)

The applicant must provide the name of the owner of the receiving facility site where the IFQ landings will occur, the site owner's tax identification number (if business entity) or date of birth (if individual), the physical location of the receiving facility (**street address only**), city, state and zip code. Please provide the business phone number, fax number and email address for the receiving facility. Please provide the name of contact person for NMFS to communicate with who works at the site.

Section C – Small Business Certification

Read the information to determine if you are a small business according to the criteria listed. Check the appropriate box, yes or no.

Section D - Certification of Applicant

The applicant or authorized representative must sign and date the form to certify 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.



Supplemental Documentation

The applicant must provide a **catch monitor plan** specific to the site given in Section B. The applicant must provide a copy of their **state buyer/dealer license** in the state where the receiving facility is located. The applicant must include a **check or money order for the application fee in the amount of \$200.00** made payable to: U.S. Department of Commerce/NOAA.

noaa

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Section A – First Receiver Site License Applicant Information

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1. State of Buyer/Dealer License (WA, OR, CA)			2. State Buyer/Dealer License Number		
3. First Receiver Site License Applicant Name			4. TIN (if business) or DOB (if person)		
	5. State Registered In (if business)				
6. Business Mailing Address			7. Business Phone Number		
Street or PO Box			()		
			8. Business Fax Number (optional)		
			()		
City	State	Zip Code	9. Business Email (optional)		
10. First Receiver Applicant Contact (who should NMFS contact about the license?)					

Section B - Site Information (Physical Location of Receiving Facility) 1. Owner of Receiving Facility 2. TIN (if business) or DOB (if person) 3. Street Address (Physical Location of Receiving Facility) 4. Business Phone Number () Street 5. Business Fax Number (optional) () City State Zip Code 6. Business Email (optional) 7. Site Contact (who should NMFS contact at the site?)

Section C – Small Business Certification

As part of required analyses of the economic effects of rulemakings, The National Marine Fisheries Service (NMFS) must determine if permit and license owners participating in the fishery are large or small businesses as defined by the 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": 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. NMFS is now using the following size standards:

Primary Business:	Fish Harvesting	Seafood Product Preparation and Packaging*	Fish and Seafood Wholesale	Nonprofit Organizations
Small business size standard:	Combined annual receipts of \$11 million or less for all affiliated operations worldwide.	Employs 750 or fewer persons on a full time, part time, temporary, or other basis, at all affiliated operations worldwide.	Employs 100 or fewer persons on a full time, part time, temporary, or other basis, at all affiliated operations worldwide.	Environmental, conservation, or professional organizations: Combined annual receipts of \$15 million or less. Other organizations: Combined annual receipts of \$7.5 million or less.

*includes catcher/processors and motherships

Is your business or organization:

- Independently owned and operated, and
- not dominant in its field of operation (including any affiliates), and
- considered small by the standards listed in the table above?

If you answered yes to all three questions, please check here:	
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If you answered **no** to any of these questions, please check here:

You must check one box.

If you have any questions about these standards or the definition of affiliation, please call West Coast Regional Economist, Abigail Harley, at 206-526-4273.

Section D – Certification of Applicant

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 Applicant or Authorized Representative	Date			
Printed Name of Applicant or 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 or DOB, business phone number, fax number, and email, and the names of individuals listed as contacts 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: Public reporting burden for this collection of information is estimated to average 3.33 hours per response for new applicants, and 1.66 hours for re-registering applicants (with preparation of the catch monitor plan), including the time for reviewing the 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 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.