## PERMIT/ACCOUNT 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 for a quota share (QS) permit and account. To complete the application process, any Economic Data Collection surveys due from the QS permit applicant must be deemed complete by the NOAA/Northwest Fisheries Science Center and the QS permit applicant must submit a complete trawl identification of ownership interest form. A QS permit is effective upon approval by NMFS.

#### Section A - QS Permit Applicant Information

The applicant must provide their full name as it will appear on the permit, as well as date of birth (for individuals) or tax identification number (if a business entity). Please provide the business mailing address, phone number, fax number and email address. NMFS will mail all pertinent information, including the user ID and password for the QS account and all renewals information, to the address of record.

#### **Section B - Applicant Eligibility Certification**

Applicants must certify their eligibility to own a QS permit, as outlined at 50 CFR 660.140 (d)(2)(i). Please read the criteria carefully and respond to the guestion at the bottom of the section by checking the appropriate box.

#### Section C - 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 submit a complete trawl identification of ownership interest form.

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	Section A – QS Permit Applica	nt Information				
al Name of Quota Share Peri	mit Applicant	2. TIN (	if business) or DOB (if perso	on)		
	3. Business Mailing Address			4. Business	4. Business Phone Number	
	Street or PO Box			( )		
				5. Business	Fax Number (optional)	
		T		( )		
	City	State	Zip Code	6. Business	6. Business Email (optional)	
[and at 50 CF Only the follo (A) A <b>United</b> pursuant to 4 for entities); (B) A <b>permai</b> endorsement citizenship re (C) A <b>corpor</b> that is eligible (general fishe is an exception the allocation to sections 20	t must be eligible to own a QS permit FR 660.140 (d)(2)(i)], and respond to wing persons are eligible to own QS States citizen, that is eligible to own 6 U.S.C. 12113 (general fishery endoment resident alien, that is eligible to pursuant to 46 U.S.C. 12113 (general quirement for entities); or ation, partnership, or other entity elet to own and control a U.S. fishing very endorsement requirements and 75 on for any entity that owns a mothership period and is eligible to own or control (3)(g) and 213(g) of the AFA.	. Please review the following question and control a large own and control all fishery endor established und ssel with a fisher percent citized hip that participal that U.S. fish	the eligibility requirem lestion.  J.S. fishing vessel with ements and 75 percent of a U.S. fishing vessel sement requirements are the laws of the United by endorsement pursuanship requirement for eated in the west coast ling vessel with a fisher	a a fishery er t citizenship I with a fishe and 75 perce ed States or lant to 46 U. entities). How groundfish f ry endorsen	ndorsement o requirement ery ent any State, .S.C. 12113 wever, there fishery during nent pursuant	

Section C – Certification of Applicant				
	declare that I, the undersigned, am authorized to certify this ap ation contained herein is true, correct, and complete to the best			
ature 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 applicant eligibility criteria 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 0.33 hours per response, 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: Assistant Regional Administrator, 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.