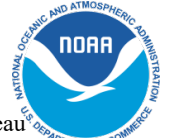


Application for Pacific Cod Trawl Cooperative (PCTC) Program Cooperative Quota

U.S. Dept. of Commerce/NOAA
National Marine Fisheries Service (NMFS)
Restricted Access Management Program (RAM)
P.O. Box 21668
Juneau, AK 99802-1668
(800) 304-4846 toll free / (907) 586-7202 in Juneau
(907) 586-7354 fax / RAM.alaska@noaa.gov email



This application must be submitted annually by a Pacific Cod Trawl Cooperative (PCTC) Program cooperative representative and received by NMFS by **November 1.**

- ◆ A PCTC Program cooperative must submit a complete application subject to NMFS review and approval to receive a cooperative quota (CQ) permit.
- ◆ The CQ permit will establish an annual amount of Pacific cod CQ and halibut and crab prohibited species catch limits that may be used by the PCTC Program cooperative.
- ◆ A CQ permit will list the amount of CQ, by fishery, held by the PCTC Program cooperative, the members of the PCTC Program cooperative, LLP licenses assigned to that PCTC Program cooperative, and the vessels that are authorized to harvest fish under that CQ permit.
- ◆ The cooperative representative will be required to pay cost recovery fees on behalf of the cooperative as specified at 50 CFR 679.135.

ATTACHMENTS

For the cooperative application to be considered complete, the following documents must be attached:

- ◆ A copy of the PCTC Program cooperative agreement or contract signed by the members of the PCTC Program cooperative. The membership agreement or contract must specify:
 - A copy of the business license issued by the state where the cooperative is registered as a business entity.
 - A copy of the articles of incorporation or partnership agreement of the cooperative.
 - A copy of the cooperative agreement signed by the members of the cooperative and associated processor(s). The cooperative agreement must specify that the QS holders, including processors, cannot participate in price setting negotiations, except as permitted by general antitrust law.
 - The cooperative has a monitoring program sufficient to ensure compliance with the PCTC Program.
 - QS holders who are members of this cooperative or associated with this cooperative must ensure full payment of the cost recovery fees.
 - The cooperative's plan to allocate CQ to member vessels in accordance with the vessel use caps specified at § 679.133.
 - The cooperative's plan to monitor CQ leasing activity, including into GOA fisheries, and use of CQ derived from processor held QS within this cooperative.
 - A cooperative intending to harvest any amount of the CQ set-aside must provide the cooperative's plan for coordinating harvest and delivery of the CQ set-aside with an Aleutian Islands shoreplant as defined § 679.2.
- ◆ Intercooperative Agreement
 - Each year, the cooperative must provide the plan for coordinating harvest and delivery of the set-aside with an Aleutian Islands (AI) shoreplant in the cooperative application.
 - The cooperatives must also provide how they would ensure that CVs under 60 feet MLOA assigned to an LLP with a transferable AI trawl endorsement have the opportunity to harvest 10 percent of the AI CQ set-aside.

BLOCK A – PCTC PROGRAM COOPERATIVE IDENTIFICATION

1. Cooperative’s Legal Name:	2. NMFS ID:	3. Taxpayer Identification Number
4. Type of business entity under which the cooperative is organized: <input type="checkbox"/> Cooperative <input type="checkbox"/> Partnership <input type="checkbox"/> Other (Please specify)		
5. State in which the cooperative is legally registered as a business entity:	6. Name of Cooperative Representative:	
7. Permanent Business Address:		
8. Business Telephone Number:	9. E-mail Address:	

**BLOCK B –PCTC PROGRAM COOPERATIVE MEMBER HARVESTERS
LLP License Holder and Ownership Documentation**

LLP License Holder’s Full Name:	NMFS Person ID:	
	LLP License Number(s):	
Enter the names of all persons, to the individual level, holding an ownership interest in the LLP licenses assigned to the PCTC Program cooperative and the percent of ownership each person and individual holds in the QS permits(s).		
Name	NMFS ID	% Ownership in the LLP License

LLP License Holder and Ownership Documentation

LLP License Holder’s Full Name:	NMFS Person ID:	
	LLP License Number(s):	
Enter the names of all persons, to the individual level, holding an ownership interest in the LLP licenses listed above and the percentage ownership each person and individual holds in the QS permit(s). Attach additional pages as necessary.		
Name	NMFS ID	% Ownership in the LLP License

(Copy this page to accommodate additional LLPs as necessary)

LLP License Holder and Ownership Documentation		
LLP License Holder's Full Name:	NMFS Person ID:	
	LLP License Number(s):	
Enter the names of all persons, to the individual level, holding an ownership interest in the LLP Licenses listed above and the percentage ownership each person and individual holds in the QS permit(s). Attach additional pages as necessary.		
Name	NMFS ID	% Ownership in the LLP License

LLP License Holder and Ownership Documentation		
LLP License Holder's Full Name:	NMFS Person ID:	
	LLP License Number:	
Enter the names of all persons, to the individual level, holding an ownership interest in the LLP Licenses listed above and the percentage ownership each person and individual holds in the QS permit(s). Attach additional pages as necessary.		
Name	NMFS ID	% Ownership in the LLP License

LLP License Holder and Ownership Documentation		
LLP License Holder's Full Name:	NMFS Person ID:	
	LLP License Number:	
Enter the names of all persons, to the individual level, holding an ownership interest in the LLP Licenses listed above and the percentage ownership each person and individual holds in the QS permit(s). Attach additional pages as necessary.		
Name	NMFS ID	% Ownership in the LLP License

BLOCK D – IDENTIFICATION OF ASSOCIATED PROCESSOR

(Copy this page to accommodate additional processors as necessary)

1. Processor Name:		2. NMFS Person ID:
3. Processor Address:		4. ADF&G Processor Code:
5. Federal Fisheries Permit or Federal Processor Permit Number:		6. Processor QS Permit Number:
7. Enter the names of all persons, to the individual level, holding an ownership interest in the PCTC Program QS permits listed above and the percentage ownership each person and individual holds in the PCTC Program QS permit(s). Attach additional pages as necessary.		
Name	NMFS ID	% of ownership in the PCTC Program QS permit

BLOCK D – IDENTIFICATION OF ASSOCIATED PROCESSOR (continue if necessary)

1. Processor Name:		2. NMFS Person ID:
3. Processor Address:		4. ADF&G Processor Code:
5. Federal Fisheries Permit or Federal Processor Permit Number:		6. Processor QS Permit Number:
7. Enter the names of all persons, to the individual level, holding an ownership interest in the PCTC Program QS permits listed above and the percentage ownership each person and individual holds in the PCTC Program QS permit(s). Attach additional pages as necessary.		
Name	NMFS ID	% of ownership in the PCTC Program QS permit

BLOCK E - CERTIFICATION OF PCTC PROGRAM COOPERATIVE REPRESENTATIVE

Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury that the foregoing is true and correct.

Signature of Cooperative Representative:

Date Signed:

Printed Name of Cooperative Representative:

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 0648-0811. Without this approval, we could not conduct this information collection. Public reporting for this information collection is estimated to be approximately 2 hours 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 mandatory pursuant to 50 CFR part 679 and section 402(a) of the Magnuson-Stevens Fishery Conservation and Management Act (16 U.S.C. 1801, *et seq.*). 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 by the Magnuson-Stevens Fishery Conservation and Management Act, 16 U.S.C. 1801 *et seq.*

PURPOSE: NMFS uses the information provided on this application form to identify a cooperative that is eligible to participate in the Pacific Cod Trawl Cooperative (PCTC) Program; the QS holders, vessels, and processors that are members of the cooperative; and the person who is the authorized representative for the cooperative. In addition, NMFS uses the information on this application form as a basis for issuing annual cooperative quota for groundfish and halibut prohibited species catch limits to each eligible cooperative. The primary purpose for requesting the social security number/tax ID number is for the collection and reporting on any delinquent amounts arising out of such person's relationship with the government pursuant to the Debt Collection Improvement Act of 1996 (Public Law 104-134). All potential PCTC Program QS holders may incur a debt to the government because of fee liabilities charged under the PCTC Program cost recovery fee program authorized under section 304(d)(2)(A) of the Magnuson-Stevens Act and implemented by regulations at 50 CFR 679.135.

ROUTINE USES: Disclosure of this information is 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. NMFS posts some information from these application forms on its public website (<https://www.fisheries.noaa.gov/region/alaska>), including the name of the authorized representative of the cooperative, the business address of the cooperative, and the names of the LLP license holders who are members of the cooperative. In addition, NMFS may share information submitted on this application form with other State and Federal agencies or fishery management commissions, including staff of the North Pacific Fishery Management Council and Pacific States Marine Fisheries Commission. Other information is confidential under section 402(b) of the Magnuson-Stevens Act and NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics.

DISCLOSURE: Providing this information is mandatory; failure to provide complete and accurate information will prevent the annual issuance of PCTC Program cooperative quota.

Instructions for PCTC Program Cooperative Quota (CQ)

An Application for PCTC Program CQ must be submitted by November 1 each year. NMFS will issue a CQ permit to a cooperative if the cooperative submits this application and it is approved by NMFS. A PCTC Program CQ permit is valid only for the duration of the PCTC Program fishing season. LLP license holders that hold PCTC Program quota share (QS) must join a cooperative annually in association with a processor who holds a PCTC Program Processor Permit to harvest their trawl CV Pacific cod CQ. A minimum of three LLP licenses are needed to form a cooperative. Only one processor may join a cooperative.

PCTC Program quota share (QS) means a permit issued by NMFS expressed in numerical units, that designates the amount of PCTC QS units derived from the Pacific cod legal landings assigned to an LLP license or PCTC Program QS permit held by a processor and used as the basis for the issuance of annual CQ.

PCTC Program cooperative means a group of Pacific cod eligible harvesters who have chosen to form a cooperative under the requirements in § 679.131 in order to combine and harvest fish collectively under a CQ permit issued by NMFS.

- Each PCTC Program cooperative must be formed as a partnership, corporation, or other legal business entity that is registered under the laws of one of the 50 states or the District of Columbia;
- Each PCTC Program cooperative must appoint an individual as the cooperative representative to act on the cooperative's behalf and to serve as a contact point for NMFS for questions regarding the operation of the cooperative. The representative may be a member of the cooperative, or some other individual designated by the cooperative to act on its behalf;
- Each PCTC Program cooperative must submit a timely and complete application for CQ; and
Each PCTC Program cooperative must meet the mandatory requirements established in 50 CFR 679.131(j)(3) applicable to that PCTC Program cooperative.

GENERAL INFORMATION

Please allow at least 10 working days for your application to be processed.

Application forms are available on the NMFS Alaska Region website at <https://www.fisheries.noaa.gov/region/alaska> or by contacting NMFS at 800-304-4846, Option 2.

A completed application must be received by NMFS no later than November 1 or if sent by U.S. mail, the application must be postmarked by that time. Objective written evidence of timely application will be considered as proof of a timely application.

This application may only be submitted to NMFS using the methods described below. Type or print legibly in ink; retain a copy of completed application for your records.

When completed, submit the application:

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

by delivery to: Room 713, Federal Building
709 West 9th Street
Juneau, AK

by fax to: (907) 586-7354

If you need additional information:

Contact RAM at: (800) 304-4846 (Option #2) or (907) 586-7202 (Option #2)

E-mail address: ram.alaska@noaa.gov

Website: <https://www.fisheries.noaa.gov/region/alaska>

COMPLETING THE APPLICATION

ATTACHMENTS

Include all of the attachments listed on page 1 of this application form. For more information, please see § 679.131(a)(4)(vii).

BLOCK A – PCTC PROGRAM COOPERATIVE IDENTIFICATION

1. PCTC Program Cooperative's Legal Name
2. NMFS Person ID
3. Tax Identification Number
4. Type of business entity under which organized
5. State in which legally registered as a business entity
6. Name of the Cooperative Representative
7. Permanent Business Address, including P.O. Box number or street address, city, state, and zip code
8. Business Telephone Number including area code
9. Business E-mail Address

BLOCK B – PCTC PROGRAM COOPERATIVE MEMBER HARVESTERS (*PCTC Quota Share (QS) Permit Holder and Ownership Documentation*). LLP license holders with PCTC QS should be listed in Block B. The associated processor should be listed in Block D. (*Copy this page to accommodate additional cooperative members as necessary*)

1. LLP License Holder's Full Name
2. NMFS Person ID
3. PCTC QS permit number(s). Note: This is the LLP License Number on which the PCTC QS is assigned.
4. List all persons, to the individual level, holding an ownership interest in the PCTC QS permit(s) assigned to the PCTC Program cooperative and the percent of ownership each person and individual holds in the PCTC QS permit(s).

BLOCK C - IDENTIFICATION OF PCTC PROGRAM COOPERATIVE MEMBER VESSELS AND FFP

(*Copy this page to accommodate additional vessels as necessary*)

Provide a list of any vessels that may be used by the PCTC Program cooperative to harvest CQ during the year for which CQ is applied. This list may not be modified during the year for which the CQ permit is issued. Please list vessel name, Alaska Department of Fish and Game (ADF&G) vessel registration number, U.S. Coast Guard (USCG) documentation number, and FFP number on which the vessel is currently named.

BLOCK D – IDENTIFICATION OF PCTC PROGRAM COOPERATIVE MEMBER PROCESSOR

1. Processor Name
2. NMFS Person ID
3. Processor Address
4. ADF&G Processor Code
5. Federal Fisheries Permit (FFP) or Federal Processor Permit (FPP) Number
6. Processor QS Permit Number
7. List all the persons, to the individual level, holding an ownership interest in the PCTC QS permit assigned to the PCTC Program cooperative and the percentage of ownership each person and individual holds in the PCTC QS permit.

BLOCK E – CERTIFICATION OF COOPERATIVE AUTHORIZED REPRESENTATIVE

The PCTC Program cooperative's representative must print their name, sign, and date the application certifying that all information is true and correct.