**Online Mock-Up for Directed Open Access Groundfish Permits (pursuant to proposed rule 0648-BN08)**

OMB # 0648-0203, Expiration: XX/XX/20XX

Directions: Please complete the Directed Open Access Groundfish permit application form and submit. Only one permit per vessel will be issued.

The applicant is required to:

1. complete any field with an \* next to it (you can save at any time),
2. complete payment of $XX to pay.gov using the “GO TO PAY.GOV” button (this will not show up until the application has been saved), and
3. authorize and ubmit the application to NOAA Fisheries for processing. Please note that once the application is submitted you will no longer be able to edit.

*\*\*\* If you submitted your application correctly you will receive an email confirming your application has been submitted. If you do not receive this email, please check that all the requirements of the application have been fulfilled (all fields complete, fee paid, and application authorized).\*\*\**

Once NOAA Fisheries has reviewed and approved the application, which may take up to 15 days, the permit will be sent to the vessel owner email address provided on this application. The NOAA Fisheries West Coast Permits Office may contact you to confirm information, request additional information, or if there are issues with your applicaiton. Please ensure that your phone number and email are entered correctly. **No emailed, faxed, or paper applications will be accepted.**

Permits are only valid from the date of issuance to the expiration date. Permits expire on the last day of the vessel owner’s birth month. For example, if the permit holder’s birth month is March and the permit is issued on May 7, 2024, the permit will expire on March 31, 2025.

Permits are not transferable or renewable. Any changes to a vessel (including a change in ownership, vessel name change, or anything else) may invalidate the permit.

1. Select the type(s) of gear which you will be using this season\*:

 XXXXX

 XXXXX

 XXXXX

 XXXXX

2. Vessel Name\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3. Vessel Document Number (USCG or State Registration)\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Vessel Overall Length (ft)\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Vessel Weight (Gross Tons)\*:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Vessel Weight (Net Tons)\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 7. Year Built:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. Home Port: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9. Number of Crew: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 10. Owner’s Name or Company’s Name\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 11. Owner's SSN or Company's TIN\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 12. Owner's Date of Birth\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 13. Owner/Company Email Address\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 14. Owner/Company Mailing Address\*:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 15. Owner/Company City\*:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 16. Owner/Company State\*:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

17. Owner/Company Zip Code\*:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 18. Owner/Company Telephone Number\*:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 19. Owner/Company Cell Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

20. Co-owner Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 21. Is the Vessel Owner different than the Vessel Captain?

 Yes

 No

19. If the Vessel Owner is different than the Vessel Captain, please provide the name of the Captain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

20. I declare that the above information is true to the best of my knowledge and understand that any false statement may invalidate the open access vessel permit.\*

Applicant’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Privacy Act Statement**

**Authority:**  The collection of this information is authorized under 5 U.S.C. § 301, Departmental regulations; Executive Order 12656**,** Assignment of emergency preparedness responsibilities; Homeland Security, Federal Continuity Directive 1, requiring Federal agencies to account for its personnel during emergencies; and Departmental Administrative Order 210-1, Emergency Readiness for Departmental Continuity.

**Purpose:**  The Department of Commerce (Department) is collecting this information to ensure managers, supervisors, continuity of operations (COOP), and other appropriate staff and individuals have the most current personal contact information for contacting you in the event of an emergency or if needed for a shift and cannot be contacted otherwise.  As an example, the information will be used to ensure employee accountability as it relates to protection and safe being in a catastrophic situation.

**Routine Uses:**  The Department will use this information to send notifications, alerts, and/or activations and to relay critical updates and guidance to Department personnel in response to an

emergency scenario or exercise.  Disclosure of this information is permitted under the Privacy Act of 1974 (5 U.S.C. Section 552a**)** to be shared among Department staff for work-related purposes.  Disclosure of this information is also subject to all of the published routine uses as identified in the Privacy Act System of Records Notice COMMERCE/DEPT-18, Employees Personnel Files Not Covered by Notices of Other Agencies.

**Disclosure:**  Furnishing this information is mandatory.  The failure to provide accurate information may delay or prevent you from receiving notifications in the event of an emergency. The failure to provide this information also may have an effect on your Federal service under certain circumstances.  For example, failure to supply this information may delay or make it impossible to notify you in the event of an emergency about a change to your duty location and/or the Department’s needs for your service in an emergency, which may result in you being placed in an absent without leave status.

**PRA STATEMENT:** Public reporting burden for this collection of information is estimated to average 20 minutes 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 aspect of this collection of information, including suggestions for reducing the 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 penalty for failure to comply with, a collection of information subject to the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number 0648-0203.