

NOTICE OF OFFICE OF MANAGEMENT AND BUDGET ACTION

Diana Hynek
Departmental Paperwork Clearance Officer
Office of the Chief Information Officer
14th and Constitution Ave. NW.
Room 6625
Washington, DC 20230

07/12/2006

In accordance with the Paperwork Reduction Act, OMB has taken the following action on your request for approval of a new information collection received on 05/18/2006.

TITLE: Alaska Rockfish Pilot Program

AGENCY FORM NUMBER(S): None

ACTION : APPROVED WITHOUT CHANGE

OMB NO.: 0648-0545

EXPIRATION DATE: 07/31/2009

BURDEN:	RESPONSES	HOURS	COSTS(\$,000)
Previous	0	0	0
New	1,369	3,267	6
Difference	1,369	3,267	6
Program Change		3,267	6
Adjustment		0	0

TERMS OF CLEARANCE: None

NOTE: The agency is required to display the OMB control number and inform respondents of its legal significance (see 5 CFR 1320.5(b)).

OMB Authorizing Official Title

John F. Morrall III Acting Deputy Administrator, Office of
Information and Regulatory Affairs

PAPERWORK REDUCTION ACT SUBMISSION

Please read the instructions before completing this form. For additional forms or assistance in completing this form, contact your agency's Paperwork Clearance Officer. Send two copies of this form, the collection instrument to be reviewed, the supporting statement, and any additional documentation to: Office of Information and Regulatory Affairs, Office of Management and Budget, Docket Library, Room 10102, 725 17th Street NW, Washington, DC 20503.

1. Agency/Subagency originating request	2. OMB control number b. <input type="checkbox"/> None a. _____ - _____
3. Type of information collection (<i>check one</i>) a. <input type="checkbox"/> New Collection b. <input type="checkbox"/> Revision of a currently approved collection c. <input type="checkbox"/> Extension of a currently approved collection d. <input type="checkbox"/> Reinstatement, without change, of a previously approved collection for which approval has expired e. <input type="checkbox"/> Reinstatement, with change, of a previously approved collection for which approval has expired f. <input type="checkbox"/> Existing collection in use without an OMB control number For b-f, note Item A2 of Supporting Statement instructions	4. Type of review requested (<i>check one</i>) a. <input type="checkbox"/> Regular submission b. <input type="checkbox"/> Emergency - Approval requested by _____ / _____ / _____ c. <input type="checkbox"/> Delegated
7. Title	5. Small entities Will this information collection have a significant economic impact on a substantial number of small entities? <input type="checkbox"/> Yes <input type="checkbox"/> No
8. Agency form number(s) (<i>if applicable</i>)	6. Requested expiration date a. <input type="checkbox"/> Three years from approval date b. <input type="checkbox"/> Other Specify: _____ / _____
9. Keywords	
10. Abstract	
11. Affected public (<i>Mark primary with "P" and all others that apply with "x"</i>) a. ___ Individuals or households d. ___ Farms b. ___ Business or other for-profit e. ___ Federal Government c. ___ Not-for-profit institutions f. ___ State, Local or Tribal Government	12. Obligation to respond (<i>check one</i>) a. <input type="checkbox"/> Voluntary b. <input type="checkbox"/> Required to obtain or retain benefits c. <input type="checkbox"/> Mandatory
13. Annual recordkeeping and reporting burden a. Number of respondents _____ b. Total annual responses _____ 1. Percentage of these responses collected electronically _____ % c. Total annual hours requested _____ d. Current OMB inventory _____ e. Difference _____ f. Explanation of difference 1. Program change _____ 2. Adjustment _____	14. Annual reporting and recordkeeping cost burden (<i>in thousands of dollars</i>) a. Total annualized capital/startup costs _____ b. Total annual costs (O&M) _____ c. Total annualized cost requested _____ d. Current OMB inventory _____ e. Difference _____ f. Explanation of difference 1. Program change _____ 2. Adjustment _____
15. Purpose of information collection (<i>Mark primary with "P" and all others that apply with "X"</i>) a. ___ Application for benefits e. ___ Program planning or management b. ___ Program evaluation f. ___ Research c. ___ General purpose statistics g. ___ Regulatory or compliance d. ___ Audit	16. Frequency of recordkeeping or reporting (<i>check all that apply</i>) a. <input type="checkbox"/> Recordkeeping b. <input type="checkbox"/> Third party disclosure c. <input type="checkbox"/> Reporting 1. <input type="checkbox"/> On occasion 2. <input type="checkbox"/> Weekly 3. <input type="checkbox"/> Monthly 4. <input type="checkbox"/> Quarterly 5. <input type="checkbox"/> Semi-annually 6. <input type="checkbox"/> Annually 7. <input type="checkbox"/> Biennially 8. <input type="checkbox"/> Other (describe) _____
17. Statistical methods Does this information collection employ statistical methods <input type="checkbox"/> Yes <input type="checkbox"/> No	18. Agency Contact (person who can best answer questions regarding the content of this submission) Name: _____ Phone: _____

19. Certification for Paperwork Reduction Act Submissions

On behalf of this Federal Agency, I certify that the collection of information encompassed by this request complies with 5 CFR 1320.9

NOTE: The text of 5 CFR 1320.9, and the related provisions of 5 CFR 1320.8(b)(3), appear at the end of the instructions. *The certification is to be made with reference to those regulatory provisions as set forth in the instructions.*

The following is a summary of the topics, regarding the proposed collection of information, that the certification covers:

- (a) It is necessary for the proper performance of agency functions;
- (b) It avoids unnecessary duplication;
- (c) It reduces burden on small entities;
- (d) It used plain, coherent, and unambiguous terminology that is understandable to respondents;
- (e) Its implementation will be consistent and compatible with current reporting and recordkeeping practices;
- (f) It indicates the retention period for recordkeeping requirements;
- (g) It informs respondents of the information called for under 5 CFR 1320.8(b)(3):
 - (i) Why the information is being collected;
 - (ii) Use of information;
 - (iii) Burden estimate;
 - (iv) Nature of response (voluntary, required for a benefit, mandatory);
 - (v) Nature and extent of confidentiality; and
 - (vi) Need to display currently valid OMB control number;
- (h) It was developed by an office that has planned and allocated resources for the efficient and effective management and use of the information to be collected (see note in Item 19 of instructions);
- (i) It uses effective and efficient statistical survey methodology; and
- (j) It makes appropriate use of information technology.

If you are unable to certify compliance with any of the provisions, identify the item below and explain the reason in Item 18 of the Supporting Statement.

Signature of Senior Official or designee

Date

Agency Certification (signature of Assistant Administrator, Deputy Assistant Administrator, Line Office Chief Information Officer, head of MB staff for L.O.s, or of the Director of a Program or StaffOffice)

Signature

Date

Signature of NOAA Clearance Officer

Signature

Date

SUPPORTING STATEMENT

NMFS ALASKA ROCKFISH PILOT PROGRAM

OMB CONTROL NO. 0648-xxxx

INTRODUCTION

Although several laws and regulations guide this action, the principal laws and regulations that govern this action are the Consolidated Appropriations Act of 2004, the Magnuson-Stevens Conservation and Management Act (Magnuson-Stevens Act), the National Environmental Policy Act (NEPA), the Regulatory Flexibility Act, and Executive Order 12866.

In Section 802 of the Consolidated Appropriations Act of 2004, the U.S. Congress included a directive to the Secretary of Commerce (Secretary) to establish, in consultation with the North Pacific Fishery Management Council (Council), a pilot program for management of three rockfish fisheries in the Central Gulf of Alaska (CGOA) in the Exclusive Economic Zone off the coast of Alaska.

The Rockfish Pilot Program (Program) is scheduled to last for a two-year period, from January 2007 until December 31, 2008. Broadly, the Program would provide exclusive harvesting and processing privileges for a specific set of rockfish species and associated species harvested incidentally to those CGOA rockfish; an area from 140° W. long. to 168° W. long. This Program includes:

- For the catcher processor sector, a cooperative program under which non-members of cooperatives fish in a limited access fishery.
- For the catcher vessel sector, a cooperative program under which each catcher vessel participant is eligible for a cooperative in association with the processor to which it delivered the most pounds during the processor qualifying years.
- Catcher vessel participants that choose not to join a cooperative would be permitted to fish in a limited access fishery.

The Program was developed by industry representatives, primarily from Kodiak, Alaska, in conjunction with catcher/processor representatives. They sought to improve the economic efficiency of the CGOA rockfish fisheries by establishing cooperatives to provide exclusive harvest privileges. Currently, rockfish fisheries, and many other groundfish fisheries, are managed under the license limitation program (LLP) (see OMB No. 0648-0334). The LLP program requires harvesters to possess an LLP license to fish, but does not provide specific harvest privileges.

BACKGROUND

The rockfish species that are the subject of the Program are primarily harvested using trawl gear,

although some directed fishing with fixed gear has occurred. In the CGOA, the directed trawl fisheries for these rockfish typically begin about the first of July. Directed fishing for these rockfish with hook-and-line annually opens on January 1. Separate total allowable catches (TACs) are set for the three different fisheries. Participants usually begin by targeting Pacific Ocean perch until that directed fishery is completed; directed fishing for Northern rockfish and pelagic shelf rockfish fisheries then commence. The directed fisheries for all three species are usually completed during the month of July.

The current entry limitations to the harvest sector in GOA groundfish fisheries (which include the rockfish fisheries) have restricted the fisheries to historic participants. A complete discussion of the evolution of management of the fisheries is contained in the Alaska Groundfish Fisheries Programmatic Supplemental Environmental Impact Statement (National Marine Fisheries Service, 2004).

A. JUSTIFICATION

Slowing the race for fish will provide participants with the opportunity to realize efficiencies and reduce waste. Allowing participants to better schedule their rockfish activities with participation in other fisheries should also improve efficiencies. In addition, timing participation in response to market conditions could provide for some financial improvement. Consumers could also benefit from slowing the race for fish through improvements in quality and quantity of outputs.

1. Explain the circumstances that make the collection of information necessary.

While the Council is formulating GOA comprehensive rationalization to address similar problems in other fisheries, a short-term solution is needed to stabilize the fishing community of Kodiak, Alaska. Located on the island of Kodiak in the CGOA, Kodiak has experienced multiple processing plant closures. Its residential work force is at risk due to shorter and shorter processing seasons. The community fish tax revenues continue to decrease as fish prices and port landings decrease habitat.

2. Explain how, by whom, how frequently, and for what purpose the information will be used. If the information collected will be disseminated to the public or used to support information that will be disseminated to the public, then explain how the collection complies with all applicable Information Quality Guidelines.

a. Application to Participate in the Rockfish Pilot Program.

A person who wishes to participate in the Rockfish Program as an Eligible Rockfish Harvester or Eligible Rockfish Processor must submit a completed application such that NMFS receives it no later than 1700 hours A.L.T. on December 1, 2006. This application may be submitted to NMFS by FAX or hand delivered. Forms are available through the internet on the NMFS Alaska Region website at <http://www.fakr.noaa.gov>, or by contacting NMFS at 800-304-4846, Option 1.

Eligible Rockfish Harvester

An eligible rockfish harvester could apply to participate in only one fishery per year with an LLP license and its associated QS. The application would be valid for one year. A person would be eligible to receive QS under this Program if:

- ◆ That person held a permanent fully transferable LLP license endorsed for Central GOA groundfish with a trawl designation at the time of application;
- ◆ A vessel made landings of primary rockfish species attributed to that LLP license during a specific time period;
- ◆ Those landings were legal landings; and
- ◆ That person submitted a timely application that is subsequently approved by NMFS.

The Program would allocate QS to LLP license holders based on the catch history associated with the LLP licenses held by that person at the time of application. Eligibility to receive QS would be based on the history of legal landings of primary rockfish species in the Central GOA associated with an LLP license.

Eligible Rockfish Processor.

An Eligible Rockfish Processor permit is issued to persons who have submitted a complete application that is subsequently approved by the Regional Administrator. An Eligible Rockfish Processor permit authorizes a shoreside processor or stationary floating processor to receive fish harvested under the Rockfish Program, except for fish harvested under the Rockfish Entry Level Fishery.

A permit is valid until the permit is modified by transfers under § 679.80(l) or until the permit is revoked, suspended, or modified pursuant to § 679.43 or 15 CFR part 904.

A legible copy of the Eligible Rockfish Processor permit must be available at the facility at which Rockfish Program fish are received.

Application to Participate in the Rockfish Pilot Program

Indicate type of eligibility for which you are applying

Applicant information.

Applicant's name, NMFS person ID (if applicable), and tax ID or social security number* (required)

**The Debt Collection Improvement Act, in Section 7701 of title 31, United States Code requires collection of this information from each person doing business with a federal agency. This information is used for purposes of collecting and reporting any delinquent amounts arising out of such person's relationship with the government. This information is also used to verify the identity of the applicant(s) and to accurately retrieve confidential records related to federal commercial fishery permits issued under 50 CFR Part 679.*

Permanent business mailing address, business telephone number, fax number, and e-mail address (if available); Applicant must be a U.S. citizen or U.S. corporation, partnership, or other business entity to obtain a catch history or halibut PSC history assignment.

Indicate (YES or NO) if the applicant is a U.S. citizen. If YES enter date of birth

Indicate (YES or NO) if the applicant is a U.S. corporation, partnership, association, or other business Entity. If YES, enter date of incorporation

Indicate (YES or NO) if the applicant is a successor-in-interest to a deceased individual or to a non-individual no longer in existence; if YES attach death certificate or evidence of dissolution.

Legal rockfish landings

If claiming Legal Rockfish Landings associated with a groundfish LLP license, enter the following information

Original Qualifying Vessel (OOV)

LLP Groundfish License No

Name of vessel
 ADF&G vessel registration number
 USCG documentation number
 Dates of fishing activity

All other vessels used under this LLP license

LLP groundfish license No.
 Name(s) of vessel(s)
 ADF&G No.
 USCG No.
 Dates of fishing activity

If claiming Legal Rockfish Landings in the Catcher/Processor Sector, enter the following information for the catcher/processor used under authority of this LLP license.

LLP groundfish license No.
 Catcher/processor Name(s)
 ADF&G vessel registration number
 USCG documentation number

Processor eligibility

Indicate (YES or NO) whether applicant received at least 250 metric tons in round weight equivalent of aggregate Legal Rockfish Landings of Primary Rockfish Species each calendar year in any four of the five calendar years beginning 1996 through 2000 during the season dates for that Primary Rockfish Species as established in Table 28 to part 679

If YES, enter the following information for each processor where legal rockfish landings were received

Name of receiving processor
 ADF&G processor code
 Qualifying years/seasons
 Name of the community in which the primary species rockfish were processed.

Enter the three calendar years from January 1, 1996 through December 31, 2000, for use by NMFS to determine the percentage of Legal Rockfish Landings received by that Eligible Rockfish Harvester for purposes of forming a Rockfish Cooperative with that Eligible Rockfish Processor.

Attach a copy of the contract showing the legal processing history.

Applicant signature and certification.

Signature of applicant and date signed
 Printed name of applicant (or authorized representative); if representative, attach authorization

Application to Participate in the Rockfish Pilot Program, Respondent	
Number of respondents	71
48 catcher vessels	
15 catcher/processors	
8 shoreside processors and SFPs	
Total annual responses	71
Number responses per respondent = 1	
Total burden hours	142
Time per response = 2 hr	
Total personnel cost (142 x 25)	\$3550
Total miscellaneous costs (269.50)	\$270
Postage cost (0.37 x 20 = 7.40)	
Photocopy cost (0.05 x 2 x 71 = 7.10)	
FAX cost (\$5 x 51 = 255)	

Application to Participate in the Rockfish Pilot Program, Federal Government	
Total annual responses	71
Total burden hours	35
Time per response = 30/60 min = .5	
Total personnel cost (35 x \$25)	\$875

Total miscellaneous cost	0
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b. Participation Applications.

Before fishing begins in January of 2007 or 2008, NMFS requires eligible rockfish harvesters to declare (file an application) if they are going to participate in a cooperative, limited access fishery, or opt-out fishery. This declaration helps NMFS decide how to monitor harvests, and whether there is sufficient catch available in a limited access fishery to allow NMFS to open the fishery without risk of exceeding the available catch. These declarations are due by December 1 of the year before fishing. These applications apply for one year.

1. Application for Rockfish Cooperative Fishing Quota (CFQ) Permit.

A CFQ permit is issued annually to a Rockfish Cooperative if the members of that Rockfish Cooperative have submitted a complete and timely Application for CFQ by December 1 of each year and as described at § 679.80(k)(4) that is subsequently approved by the Regional Administrator. A CFQ permit authorizes a Rockfish Cooperative to participate in the Rockfish Program. The CFQ permit will indicate the amount of Primary Rockfish Species or Secondary Species that may be harvested by the Rockfish Cooperative, and the amount of Rockfish Halibut PSC that may be used by the Rockfish Cooperative. The CFQ permit will list the amount of CFQ, by fishery, held by the Rockfish Cooperative, the members of the Rockfish Cooperative and license limitation program (LLP) licenses assigned to that Rockfish Cooperative, and the vessels that are authorized to fish under the CFQ permit for that Rockfish Cooperative, and the Eligible Rockfish Processor with whom that Rockfish Cooperative is associated, if applicable.

A CFQ permit is valid under the following circumstances:

Until the end of the year for which the CFQ permit is issued;

Until the amount harvested is equal to the amount specified on the CFQ permit for a specific Primary Rockfish Species or Secondary Species;

Until the amount of halibut PSC used is equal to the amount of Rockfish Halibut PSC specified on the CFQ permit;

Until the permit is modified by transfers under § 679.80(l);

Until the permit is amended to add or remove vessels authorized to fish the CFQ for that Rockfish Cooperative;

Until the permit is revoked through an approved Rockfish Cooperative Termination of Fishing Declaration; or

Until the permit is revoked, suspended, or modified pursuant to § 679.43 or under 15 CFR part 904.

A legible copy of the CFQ permit must be carried on board the vessel(s) used by the Rockfish Cooperative.

Modification of vessels authorized to fish CFQ.

The authorized representative of a Rockfish Cooperative must notify NMFS of any change in the

vessel(s) that are authorized to fish CFQ for that Rockfish Cooperative from those indicated in the Application for CFQ. This notification must be made on an amended Application for CFQ.

This amended Application for CFQ would request that NMFS add or remove vessels authorized to fish CFQ for that Rockfish Cooperative. Such a change does not take effect until it is approved by NMFS through the issuance of a revised CFQ permit. This amended Application for CFQ may be submitted at any time after the initial issuance of CFQ to that Rockfish Cooperative for that calendar year until November 15 or until the authorized representative of that Rockfish Cooperative has submitted a Rockfish Cooperative Termination of Fishing Declaration that has been approved by NMFS.

Application for Rockfish Cooperative Fishing Quota (CFQ) Permit.

BLOCK A. COOPERATIVE INFORMATION

Enter the Rockfish Cooperative's legal name; the type of business entity under which the Rockfish Cooperative is organized; the state in which the Rockfish Cooperative is legally registered as a business entity; the printed name of the Rockfish Cooperative's authorized representative; the permanent business address, telephone number, fax number, and e-mail address (if available) of the Rockfish Cooperative or its authorized representative; and the signature of the Rockfish Cooperative's authorized representative and date signed.

BLOCK B. MEMBER INFORMATION

Harvester identification

Full name; NMFS Person ID; LLP license number(s); name of the vessel(s), ADF&G vessel registration number, and USCG documentation number of vessel(s) on which the CFQ issued to the Rockfish Cooperative will be used. If no vessel(s) are designated to use the CFQ issued to the Rockfish Cooperative on the application, then all vessels using LLP license assigned to the Rockfish Cooperative will be assumed to be designated to use the CFQ.

LLP holdership documentation

Provide the names of all persons, to the individual level, holding an ownership interest in the LLP license(s) assigned to the Rockfish Cooperative and the percentage ownership each person and individual holds in the LLP license(s).

Processor Associates of the Rockfish Cooperative

Identification.

Full name; NMFS Person ID; facility name; ADF&G processor code; SFP vessel name, ADF&G vessel registration number, and USCG documentation number of vessel (if a vessel), and Federal Processor Permit for each processing facility or vessel.

Processor ownership documentation.

Provide the names of all persons, to the individual person level, holding an ownership interest in the processor and the percentage ownership each person and individual holds in the processor.

BLOCK C. ATTACHMENTS

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

- (1) A copy of the business license issued by the state in which the Rockfish Cooperative is registered as a business entity;
- (2) A copy of the articles of incorporation or partnership agreement of the Rockfish Cooperative;
- (3) A copy of the Rockfish Cooperative agreement signed by the members of the Rockfish Cooperative (if different from the articles of incorporation or partnership agreement of the Rockfish Cooperative); and
- (4) Any article of incorporation or agreement submitted by the Rockfish Cooperative must include terms that specify that:
 - (i) Eligible Rockfish Processor affiliated harvesters cannot participate in price setting negotiations except as permitted by general antitrust law; and
 - (ii) The Rockfish Cooperative must establish a monitoring program sufficient to ensure compliance with the Rockfish Program.

BLOCK D. APPLICANT CERTIFICATION

The applicant must sign and date the application certifying that all information is true, correct, and complete to the best of his/her knowledge and belief. If the application is completed by an authorized representative, then explicit

authorization signed by the applicant must accompany the application.

Application for Rockfish Cooperative Allocation, Respondent	
Number of respondents	20
Total annual responses (1 response per respondent)	20
Total burden hours	40
Time per response = 2 hr	
Total personnel cost (\$25 x 40)	\$1000
Total miscellaneous costs	\$79
Postage cost (0.37 x 5 = 1.85)	
Photocopy cost (0.05 x 2 x 20 = 2)	
FAX cost (\$5 x 15 = 75)	

Application for Rockfish Cooperative Allocation, Federal Government	
Total responses	20
Total burden hours (0.5 x 20 = 2.5)	10
Time per response = 30/60 min = 0.5	
Total personnel cost (\$25 x 10)	\$250
Total miscellaneous cost	0

2. Application for the Limited Access fishery

An Eligible Rockfish Harvester who wishes to participate in the Rockfish Limited Access Fishery for a calendar year must submit an Application for the Rockfish Limited Access Fishery.

The Rockfish Program Fishery – Limited Access Fishery is authorized from 1200 hours, A.l.t., July 1 through 1200 hours, A.l.t., November 15. The fishery closes once the allocation is met or exceeded. If the annual catch amount assigned to the fishery is small, and forecast harvest rate is high, NMFS may not open a limited access fishery if it is likely that participants in the limited access fishery would exceed their allocation.

Application for the Limited Access fishery

Applicant information

Applicant's name

NMFS person ID (if applicable), tax ID or social security number* (required),

*The Debt Collection Improvement Act, in Section 7701 of title 31, United States Code requires collection of this information from each person doing business with a federal agency. This information is used for purposes of collecting and reporting any delinquent amounts arising out of such person's relationship with the government. This information is also used to verify the identity of the applicant(s) and to accurately retrieve confidential records related to federal commercial fishery permits issued under 50 CFR Part 679

Permanent business mailing address,

Business telephone number, facsimile number, and e-mail (if available);

Whether the applicant is an Eligible Rockfish Harvester

Whether the applicant is participating in the Limited Access Fishery

Vessel information

Name of the vessel,

ADF&G vessel registration number, USCG documentation number, and LLP license number(s) held by the applicant and used on that vessel.

Harvester ownership documentation.

Names of all persons, to the individual level, holding an ownership interest in the LLP license
 Percentage ownership each person and individual holds in the LLP license.

Applicant signature

Signature of applicant and date signed
 Printed name of applicant; if submitted by a representative, attach authorization

Application for the Limited Access Fishery, Respondent	
Number of respondents	40
Total annual responses	40
Total annual time burden hours	80
Time per response = 2 hr	
Total personnel cost (80 x \$25)	\$2000
Total miscellaneous cost	\$181
Postage cost (0.37 x 5 = 1.85)	
Photocopy cost (0.05 x 2 x 40 = 4)	
FAX cost (\$5 x 35 = 175)	

Application for the Limited Access Fishery, Federal Government	
Total annual responses	40
Total annual time burden hours	20
Time per response = 30 min/60 = 0.5	
Total personnel cost (20 x \$25)	\$500
Total miscellaneous cost	0

3. Application to Opt-out.

An Eligible Rockfish Harvester who wishes to Opt-out of the Rockfish Program for a calendar year with an LLP license assigned Rockfish QS in the Catcher/Processor Sector must submit an Application to Opt-out.

A completed application must be submitted annually by each person opting-out and received by NMFS no later than December 1.

Application to Opt-out

Applicant information

Name and NMFS person ID
 Tax ID or social security number* (required)

*The Debt Collection Improvement Act, in Section 7701 of title 31, United States Code requires collection of this information from each person doing business with a federal agency. This information is used for purposes of collecting and reporting any delinquent amounts arising out of such person's relationship with the government. This information is also used to verify the identity of the applicant(s) and to accurately retrieve confidential records related to federal commercial fishery permits issued under 50 CFR Part 679.

Permanent business mailing address
 Business telephone number, facsimile number, and e-mail address (if available);
 Indicate (YES or NO) whether the applicant is an Eligible Rockfish Harvester.
 Indicate (YES or NO) whether the applicant is opting-out of the Rockfish Pilot Program.
 Indicate (YES or NO) whether the applicant holds an LLP license with Rockfish QS assigned to the catcher/processor sector.

Vessel information

Name, ADF&G vessel registration number, and USCG documentation number of the vessel
 LLP license number(s) held by the applicant and used on that vessel.

LLP holdership documentation.

Names of all persons, to the individual level, holding an ownership interest in the LLP license
Percentage ownership each person and individual holds in the LLP license.

Applicant signature and date

Signature of applicant and date
Printed name of applicant (or authorized representative); if representative, attach authorization

Application to Opt-out, Respondent	
Number of respondents	3
Total annual responses	3
Total annual time burden hours	6
Timer per response = 2 hr	
Total personnel cost (6 x \$25)	\$150
Total miscellaneous cost	\$11
Postage cost (0.37 x 1 = 0.37)	
Photocopy cost (0.05 x 2 x 3 = 0.3)	
FAX cost (\$5 x 2 = 10)	

Application to Opt-out, Federal Government	
Total responses	3
Total burden hours	2
Time per response = 0.5 hr	
Total personnel cost (\$25 x 2)	\$50
Total miscellaneous cost	0

c. Application for the Entry-Level Fishery.

An Eligible Entry Level Harvester who wishes to participate in the Entry-Level Fishery must submit an Application for the Entry-Level Fishery.

Application for the Entry-Level Fishery

Applicant Information

Name and NMFS person ID (if applicable)
Tax ID or social security number* (required)

*The Debt Collection Improvement Act, in Section 7701 of title 31, United States Code requires collection of this information from each person doing business with a federal agency. This information is used for purposes of collecting and reporting any delinquent amounts arising out of such person's relationship with the government. This information is also used to verify the identity of the applicant(s) and to accurately retrieve confidential records related to federal commercial fishery permits issued under 50 CFR Part 679

Permanent business mailing address
Business telephone number, facsimile number, and e-mail address (if available);
Indicate (YES or NO) whether applicant is a U.S. citizen; If YES, enter date of birth
Indicate (YES or NO) whether applicant is a U.S. corporation, partnership, association, or other business entity;
if YES, enter the date of incorporation;

Vessel Information

Name, ADF&G vessel registration number, and USCG documentation number of the vessel
LLP license number(s) held by the applicant and used on that vessel
Attach a statement from an Eligible Entry Level Processor that affirms that the harvester has a market for any rockfish delivered by that harvester in the Entry-Level Fishery. (The Program requires that a harvester submit market information to ensure that participants establish a relationship with a processor, reducing

the potential for harvesters to apply for the entry level fishery but not be able to harvest and deliver fish for lack of a market.)

Applicant signature and date

Signature of applicant and date signed
 Printed name of applicant (or authorized representative); if representative, attach authorization

Application for the Entry-Level Fishery, Respondent	
Number of respondents	1071
171 trawl vessels	
900 non-trawl vessels	
Total annual responses	1071
Total annual time burden hours	2142
Time per response = 2 hr	
Total personnel cost	\$53,550
Total miscellaneous cost	\$5133
Postage cost (0.37 x 71 = 26.27)	
Photocopy cost (0.05 x 2 x 1071 = 107.10)	
FAX cost (\$5 x 1000 = 5000)	

Application for the Entry-Level Fishery, Federal Government	
Total responses	1071
Total burden hours (1071 x 0.5)	535
Time per response = 30/60 = 0.5	
Total personnel cost (535 x \$25)	\$1,3375
Total miscellaneous cost	0

c. Application for Inter-Cooperative Transfer.

A Rockfish Cooperative may transfer all or part of its CFQ to another Rockfish Cooperative. This transfer requires the submission of an Application for Inter-Cooperative Transfer to NMFS.

NMFS will notify the transferor and transferee once the application has been received and approved. A transfer of CFQ is not effective until approved by NMFS. A completed transfer of CFQ issued to a Rockfish Cooperative requires that the following information be provided to NMFS in the Application for Inter-Cooperative Transfer:

Application for Inter-Cooperative Transfer

Identification of Rockfish Cooperative transferor.

- Name, NMFS Person ID, LLP license number(s) assigned to that Rockfish Cooperative
- Name of designated representative
- Permanent business mailing address (and temporary mailing address, if appropriate)
- Business telephone number, fax number, and e-mail address (if available)

Identification of Rockfish Cooperative transferee.

- Name and NMFS Person ID
- Name of designated representative
- Permanent business mailing address (and temporary mailing address, if appropriate)
- Business telephone number, fax number, and e-mail address (if available)
- Names of all persons, to the individual person level, holding an holdership interest in the LLP license and the percentage ownership each person and individual holds in the LLP license

Identification of Rockfish Cooperative member.

- Name and NMFS person ID of the member(s) to whose use cap the Rockfish CFQ will be applied and the amount of CFQ applied to each member for purposes of applying use caps established

under the Rockfish Program under § 679.80(o).

CFQ to be transferred

Identify the type and amount of Primary Species, Secondary Species, or Rockfish Halibut PSC to be transferred

Certification of transferor.

Signature of transferor and date signed

Printed name of transferor (or authorized representative); if representative, attach authorization

Certification of transferee.

Signature of transferee and date signed

Printed name of transferee (or authorized representative); if representative, attach authorization

Application for Inter-Cooperative Transfer, Respondent	
Number of respondents	5
Total annual responses (3 x 5) 3 transfers per coop per season	15
Total annual time burden hours Time per response = 2 hr	30
Total personnel cost (30 x \$25)	\$750
Total miscellaneous cost Postage cost (0.37 x 5 = 1.85) Photocopy cost (0.05 x 2 x 15 = 1.5) FAX cost (\$5 x 10 = 50)	\$53

Application for Inter-Cooperative Transfer, Federal Government	
Total responses	15
Total burden hours Time per response = 0.5 hr	8
Total personnel cost (8 x 25)	\$200
Total miscellaneous cost	0

d. Application to Transfer Processor Eligibility.

NMFS will notify the transferor and transferee once the application has been received and approved. A transfer is not effective until approved by NMFS. A completed transfer of processor eligibility requires that the following information be provided to NMFS in the Application to Transfer Processor Eligibility:

Application to Transfer Processor Eligibility

Identification of transferor.

Name and NMFS Person ID

Permanent business mailing address (and temporary mailing address, if appropriate)

Business telephone number, fax number, and e-mail address (if available)

Facility name of SFP, ADF&G processor code, and FPP for each facility for which processor eligibility applies

Name of the community in which processor eligibility applies.

Identification of transferee.

Name and NMFS Person ID

Permanent business mailing address (and temporary mailing address, if appropriate)

Business telephone number, fax number, and e-mail address (if available)

Facility name of SFP, ADF&G processor code, and FPP for each facility where that processor eligibility will apply

Name of the community in which that processor eligibility will be used.

Certification of transferor.

Signature of transferor and date

Printed name of transferor (or authorized representative); if representative, attach authorization

Certification of transferee.

Signature of transferee and date

Printed name of transferee (or authorized representative); if representative, attach authorization

Application to Transfer Processor Eligibility, Respondent	
Number of respondents	1
Total annual responses	1
Total annual time burden hours	2
Time per response = 2 hr	
Total personnel cost (2 x \$25)	\$50
Total miscellaneous cost	\$1
Postage cost (0.37 x 1 = 0.37)	
Photocopy cost (0.05 x 2 x 1 = 0.1)	

Application to Transfer Processor Eligibility, Federal Government	
Total annual responses	1
Total annual time burden hours	1
Time per response = 30 min/60 = 0.5 hr	
Total personnel cost (1 x \$25)	\$25
Total miscellaneous cost	0

e. Rockfish Cooperative Catch Report.

Operators of catcher/processors and managers of shoreside processors or SFPs that are permitted to receive fish harvested under the Rockfish Program (see § 679.4(m)) must submit to the Regional Administrator a Rockfish Cooperative Catch Report detailing each Cooperative's delivery and discard of fish.

The Rockfish Cooperative Catch Report must be submitted by one of the following methods:

An electronic data file in a format approved by NMFS mailed to: Sustainable Fisheries, P.O. Box 21668 Juneau, AK 99802-1668; or

By fax: 907-586-7131.

The Rockfish Cooperative Catch Report must be received by the Regional Administrator by 1200 hours, A.I.t. one week after the date of completion of delivery.

Rockfish Cooperative Catch Report

CFQ Permit number;
 ADF&G vessel registration number(s) of vessel(s) delivering catch;
 Federal processor permit number of processor receiving catch;
 Date delivery completed;
 Amount of fish (in lb) delivered, plus weight of at-sea discards;
 ADF&G fish ticket number(s) issued to catcher vessel(s)

Rockfish Cooperative Catch Report, Respondent	
Number of respondents	5
Total annual responses	125
25 reports per year per respondent	
Total annual time burden hours	21 hr
Time per response = 10 min/60 = 0.17	
Total personnel cost (21 x \$25)	\$525
Total miscellaneous cost	\$19
Email cost (0.05 x 125 = 6.25)	
Photocopy cost (0.05 x 2 x 125 = 12.50)	

Rockfish Cooperative Catch Report, Federal Government	
Total annual responses	125
Total annual time burden hours	10
Time per response = 5 min/60 = 0.08	
Total personnel cost (10 x \$25)	\$250
Total miscellaneous cost	0

f. Annual Rockfish Cooperative Report

A Rockfish Cooperative permitted in the Rockfish Program annually must submit to the Regional Administrator a Rockfish Cooperative Annual Report detailing the use of the cooperative’s CFQ. The Annual Rockfish Cooperative Report must be submitted to the Regional Administrator by an electronic data file in a NMFS-approved format by fax: 907-586-7557; or by mail to the Regional Administrator, NMFS Alaska Region, P.O. Box 21668, Juneau, AK 99802-1668. The Annual Rockfish Cooperative Report must be received by the Regional Administrator by December 15th of each year. No form exists for this report.

Annual Rockfish Cooperative Report

Rockfish Cooperative CFQ, sideboard limit (if applicable), and any rockfish sideboard fishery harvests made by the cooperative’s vessels on a vessel-by-vessel basis
 Cooperative’s actual retained and discarded catch of CFQ and sideboard limit (if applicable) by statistical area and vessel-by-vessel basis

A description of the method used by the cooperative to monitor fisheries in which cooperative vessels participated
 A description of any actions taken by the cooperative in response to any members that exceeded their catch as allowed under the rockfish cooperative agreement.

Annual Rockfish Cooperative Report, Respondent	
Number of respondents	20
Total annual responses	20
Total annual time burden hours	800
Time per response = 40 hr	
Total personnel cost (800 x \$25)	\$20,000
Total miscellaneous cost	\$80

Postage cost (1.48 x 20 = 29.60)	
Photocopy cost (0.05 x 50 pp x 20 = 50)	

Annual Rockfish Cooperative Report, Federal Government	
Total annual responses	20
Total annual time burden hours	100
Time per response = 5 hr	
Total personnel cost (100 x \$25)	\$2500
Total miscellaneous cost	0

g. Rockfish Cooperative Termination of Fishing Declaration.

A Rockfish Cooperative may choose to extinguish its CFQ permit through a declaration submitted to NMFS. No form exists for this function. This declaration may only be submitted to NMFS using the following methods:

Fax: 907-586-7354; or
 Hand Delivery or Carrier.
 NMFS
 Room 713
 709 4th Street
 Juneau, AK 99801

NMFS will review the declaration and notify the Rockfish Cooperative's authorized representative once the declaration has been approved. Upon approval of a declaration, the CFQ for all Primary Rockfish Species, Secondary Species, and Rockfish Halibut PSC assigned to that Rockfish Cooperative will be set to zero and that Rockfish Cooperative may not receive any CFQ for any Primary Rockfish Species, Secondary Species, and Rockfish Halibut PSC by transfer for that calendar year.

Rockfish Cooperative Termination of Fishing Declaration

- CFQ permit number
- Date the declaration is submitted
- Rockfish Cooperative's legal name
- Permanent business address, telephone number, fax number, and e-mail address (if available) of the Rockfish Cooperative or its authorized representative,
- Printed name and signature of the authorized representative of the Rockfish Cooperative

Rockfish Cooperative Termination of Fishing Declaration, Respondent	
Number of respondents	2
Total annual responses	2
Total annual time burden hours	0.5
Time per response = 15 min/60 = 0.25 hr	
Total personnel cost (0.5 x \$25=12.50)	\$13
Total miscellaneous cost	\$12
FAX or courier (\$6 x 2=12)	
Photocopy cost (0.05 x 2 pp x 2 = 0.20)	

Rockfish Cooperative Termination of Fishing Declaration, Federal Government	
Total annual responses	2
Total annual time burden hours	0.5

Time per response = 15 min = 0.25	
Total personnel cost (0.5 x \$25)	13
Total miscellaneous cost	0

h. Appeals

The Regional Administrator will evaluate applications submitted during the specified application period and compare all claims in an application with the information in the official Program record. Claims in an application that are consistent with information in the official Program record will be accepted by the Regional Administrator. Inconsistent claims, unless verified by documentation, will not be accepted.

An applicant who submits inconsistent claims will be provided a single 30-day evidentiary period to submit the specified information, submit evidence to verify his or her inconsistent claims, or submit a revised application with claims consistent with information in the official Program record. However, if the Regional Administrator determines that the additional information or evidence does not meet the applicant's burden of proving that the inconsistent claims in his or her application are correct, inconsistent claims will be denied and the applicant will be notified by an initial administrative determination (IAD), that the applicant did not meet the burden of proof to change the information in the official rockfish program record.

If dissatisfied with the determination, the applicant may appeal to the NMFS Alaska Region Office of Administrative Appeals (OAA) under 50 CFR part 679.43. For permit appeals, the participant must provide a written statement in support of the appeal and must show why the initial determination should be reversed. If the participant does not appeal within 60 days following the issuance of the IAD, the IAD becomes a Final Agency Determination. A decision by the OAA becomes a Final Agency Action 30 days after it is issued, unless the Regional Administrator determines otherwise.

An applicant who appeals an IAD will not receive rockfish cooperative allocation until after the final resolution of that appeal in favor of the applicant.

Appeals, Respondent	
Number of respondents	1
Total annual responses	1
Total burden hours	4 hr
Time per response = 4 hr	
Total personnel cost (1 x \$25)	\$25
Total miscellaneous costs	\$2
Postage to mail appeal (1 x \$1.48)	
Photocopy (1 x 5 pp x .05 = 0.25)	

Appeals, Federal Government	
Total responses	1
Total burden hours	25
Time per response = 25 hr	
Total personnel cost (25 x \$100)	\$2500
Total miscellaneous costs	0

It is anticipated that the information collected will be disseminated to the public or used to support publicly disseminated information. As explained in the preceding paragraphs, the information gathered has utility. NOAA Fisheries will retain control over the information and safeguard it from improper access, modification, and destruction, consistent with NOAA standards for confidentiality, privacy, and electronic information. See response #10 of this Supporting Statement for more information on confidentiality and privacy. The information collection is designed to yield data that meet all applicable information quality guidelines. Prior to dissemination, the information will be subjected to quality control measures and a pre-dissemination review pursuant to Section 515 of Public Law 106-554.

3. Describe whether, and to what extent, the collection of information involves the use of automated, electronic, mechanical, or other technological techniques or other forms of information technology.

Applications are “fillable” on the computer screen by participant at the NMFS Alaska Region Home Page at www.fakr.noaa.gov, then downloaded, printed, and FAXed to NMFS. The cooperative catch report and cooperative annual report may be submitted using electronic format. Plans for the future include interactive permit screens completed through the Internet.

4. Describe efforts to identify duplication.

None of the information collected as part of this information collection duplicates other collections. This information collection is part of a specialized and technical program that is not like any other.

5. If the collection of information involves small businesses or other small entities, describe the methods used to minimize burden.

The collection-of-information does not impose a significant impact on small entities.

6. Describe the consequences to the Federal program or policy activities if the collection is not conducted or is conducted less frequently.

The intent of this action is to provide permits for a Rockfish Pilot Program in the CGOA. Without the specified permitting scheme described in this Supporting Statement, the program would be jeopardized. The consequences of not collecting this information would be that NMFS could not fulfill the intent of the law Section 802 of the Consolidated Appropriations Act of 2004

7. Explain any special circumstances that require the collection to be conducted in a manner inconsistent with OMB guidelines.

No inconsistencies occur in this collection.

8. Provide a copy of the PRA Federal Register notice that solicited public comments on the information collection prior to this submission. Summarize the public comments received in response to that notice and describe the actions taken by the agency in response to those comments. Describe the efforts to consult with persons outside the agency to obtain their views on the availability of data, frequency of collection, the clarity of instructions and recordkeeping, disclosure, or reporting format (if any), and on the data elements to be recorded, disclosed, or reported.

The NMFS Alaska Region will submit a proposed rule (RIN 0648-AT71) coincident with this submission, requesting comments from the public.

9. Explain any decisions to provide payments or gifts to respondents, other than remuneration of contractors or grantees.

No payment or gift will be provided under this program.

10. Describe any assurance of confidentiality provided to respondents and the basis for assurance in statute, regulation, or agency policy.

The information collected is confidential under section 303(d) of the Magnuson-Stevens Act (16 U.S.C. 1801 *et seq.*); and also under NOAA Administrative Order (AO) 216-100, which sets forth procedures to protect confidentiality of fishery statistics.

11. Provide additional justification for any questions of a sensitive nature, such as sexual behavior and attitudes, religious beliefs, and other matters that are commonly considered private.

This information collection does not involve information of a sensitive nature.

12. Provide an estimate in hours of the burden of the collection of information.

Estimated total unique respondents, 1,142. Estimated total annual responses, 1,369. Estimated total annual burden, 3,267 hr. Estimated total annual personnel cost, \$81,600.

13. Provide an estimate of the total annual cost burden to the respondents or record-keepers resulting from the collection (excluding the value of the burden hours in #12 above).

Estimated annual total miscellaneous costs, \$5,829.

14. Provide estimates of annualized cost to the Federal government.

Estimated total annual burden, 746 hr. Estimated total annual personnel cost, \$20,538.
Estimated total annual miscellaneous cost, \$0.

15. Explain the reasons for any program changes or adjustments reported in Items 13 or 14 of the OMB 83-I.

This is a new program.

16. For collections whose results will be published, outline the plans for tabulation and publication.

The information collected will not be published.

17. If seeking approval to not display the expiration date for OMB approval of the information collection, explain the reasons why display would be inappropriate.

In accordance with OMB requirements, the control number and the expiration date of OMB approval are shown on the forms.

18. Explain each exception to the certification statement identified in Item 19 of the OMB 83-I.

No exceptions to the certification statement are requested.

B. COLLECTIONS OF INFORMATION EMPLOYING STATISTICAL METHODS

This collection does not employ statistical methods.

BLOCK B. LEGAL ROCKFISH LANDINGS

If claiming Legal Rockfish Landings associated with a groundfish LLP license:

1. Enter the following information for the Original Qualifying Vessel (OQV)

LLP Groundfish License No.	Name of OQV	ADF&G No.	USCG No.	Dates of Fishing Activity

2. Enter the following information for all other vessels used under authority of this LLP license.

LLP Groundfish License No.	Name of Vessel	ADF&G No.	USCG No.	Dates of Fishing Activity

If claiming Legal Rockfish Landings in the Catcher/Processor Sector, enter the following information for the catcher/processor used under authority of this LLP license.

LLP Groundfish License No.	Catcher/Processor Name	ADF&G No.	USCG No.

BLOCK C. PROCESSOR ELIGIBILITY

1. Did the applicant receive not less than 250 metric tons in round weight equivalent of aggregate Legal Rockfish Landings of Primary Rockfish Species each calendar year in any four of the five calendar years beginning 1996 through 2000 during the season dates for that Primary Rockfish Species as established in Table 28 to this part?
 YES NO

2. If YES, enter the following information for each processor where Legal Rockfish Landings were received.

Name of Receiving Processor	ADF&G Processor Code	Qualifying years or seasons	*Name of Community in which primary rockfish species were processed

* The community is either:
 (1) The city if the community is incorporated as a city within the State of Alaska; or
 (2) The borough if the community is not in a city incorporated within the State of Alaska and the city is in a borough incorporated within the State of Alaska.

3. Enter the three calendar years from January 1, 1996 through December 31, 2000, for use by NMFS to determine the percentage of Legal Rockfish Landings received by that Eligible Rockfish Harvester for purposes of forming a Rockfish Cooperative with that Eligible Rockfish Processor.

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4. Attach a copy of the contract showing the legal processing history.

BLOCK D. APPLICANT CERTIFICATION

The applicant must sign and date the application certifying that all information is true, correct, and complete to the best of his/her knowledge and belief. If the application is completed by an authorized representative, attach authorization to application.

Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information presented here is true, correct, and complete.

1. Signature of Applicant (or Authorized Representative)	2. Date Signed
3. Printed Name of Applicant (or Authorized Representative); if representative, attach authorization	

Instructions for Completing
Application to
Participate in the Rockfish Pilot Program

NOTE: Participant must be a U.S. Citizen or U.S. Corporation, partnership or other business.

Use this application to apply to receive an assignment of catch history or halibut PSC history for any LLPs held by the applicant or to be eligible to receive fish from the Rockfish Pilot Program.

Type or print legibly in ink; retain a copy of completed application for your records. Completed forms should be mailed or faxed to:

NMFS Alaska Region
Restricted Access Management
P.O. Box 21668
Juneau, AK 99802-1668

FAX: (907) 586-7354

If you need additional information, contact Restricted Access Management at **(800) 304-4846 (#2)** or **(907) 586-7202 (#2)**.

Please allow at least 10 working days for your application to be processed. Items will be sent by first class mail, unless you provide alternate instructions *and* include a prepaid mailer with appropriate postage or corporate account number for express delivery.

Please indicate which type of eligibility to participate for which you are applying:

General Harvester Eligibility (catcher-vessel or catcher-processor sectors).
Complete blocks A and B, sign in Block F

Processor Eligibility (shoreside and stationary floating processors only).
Complete blocks A and C, sign in Block F

NOTE: The person who holds the processing history of a shoreside processor or stationary floating processor is the person who owns the shoreside processor or stationary floating processor at the time of Application to Participate in the Rockfish Pilot Program, unless that processing history has been transferred to another person by the express terms of a written contract that clearly and unambiguously provides that such processing history has been transferred.

If the applicant did not own one or more of the processing facilities through which claiming processor eligibility, attach a copy of that contract to the application.

BLOCK A – APPLICANT INFORMATION

Enter Applicant Name, NMFS ID (if known), Tax ID or Social Security Number* (SSN), Date of Birth or Date of Incorporation, Permanent Business Mailing Address, Business Telephone, Business Facsimile, Business e-mail (if available).

**The Debt Collection Improvement Act, in Section 7701 of title 31, United States Code requires collection of this information from each person doing business with a federal agency. This information is used for purposes of collecting and reporting any delinquent amounts arising out of such person's relationship with the government. This information is also used to verify the identity of the applicant(s) and to accurately retrieve confidential records related to federal commercial fishery permits issued under 50 CFR Part 679.*

Indicate (YES or NO) if the applicant is a U.S. citizen; if YES, enter his or her date of birth;

Indicate (YES or NO) if the applicant is a U.S. corporation, partnership, association, or other business entity; if YES, enter the date of incorporation;

Indicate (YES or NO) if the applicant is a successor-in-interest to a deceased individual or to a non-individual no longer in existence, attach death certificate or evidence of dissolution to the application.

BLOCK B – LEGAL ROCKFISH LANDINGS

1. For an applicant claiming Legal Rockfish Landings associated with an LLP license, enter the following information for each LLP license.

Original Qualifying Vessel (OOV)

Name of the OOV vessel that gave rise to the LLP license

ADF&G vessel registration number

USCG documentation number

Dates of fishing activity on vessel which gave rise to that LLP license

Other Vessels Used under the Authority of this LLP license

Name(s) of vessel

ADF&G vessel registration numbers

USCG documentation numbers

Dates of fishing activity for each vessel

2. For an applicant claiming Legal Rockfish Landings in the Catcher/Processor Sector, enter the following information for each LLP license.

Name(s) of vessel

ADF&G vessel registration numbers

USCG documentation numbers

BLOCK C – PROCESSOR ELIGIBILITY

Indicate (YES or NO) whether applicant received not less than 250 metric tons in round weight equivalent of aggregate Legal Rockfish Landings of Primary Rockfish Species each calendar year in any four of the five calendar years beginning 1996 through 2000 during the season dates for that Primary Rockfish Species as established in Table 28 to this part.

If YES, enter the following information for each processor where Legal Rockfish Landings were received.

Name and ADF&G Processor Code of Receiving Processor

Qualifying years or seasons

Name of Community* in which primary rockfish species were processed

**The community is either the city if the community is incorporated as a city within the State of Alaska; or the borough if the community is not in a city incorporated within the State of Alaska and the city is in a borough as incorporated within the State of Alaska*

3. Enter the three calendar years from January 1, 1996 through December 31, 2000, for use by NMFS to determine the percentage of Legal Rockfish Landings received by that Eligible Rockfish Harvester for purposes of forming a Rockfish Cooperative with that Eligible Rockfish Processor.

4. Attach a copy of the contract showing the legal processing history.

BLOCK D – APPLICANT CERTIFICATION

The applicant must print name, sign, and date the application certifying that all information is true, correct, and complete to the best of his/her knowledge and belief. If the application is completed by an authorized representative, then authorization must accompany the application.

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing the instructions, searching the existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Assistant Regional Administrator, Sustainable Fisheries Division, NOAA National Marine Fisheries Service, P.O. Box 21668, Juneau, AK 99802-1668.

ADDITIONAL INFORMATION

Before completing this form, please note the following: 1) Notwithstanding any other provision of law, no person is required to respond to, nor shall any person be subject 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; 2) This information is mandatory and is required to manage commercial fishing efforts under 50 CFR part 679 and under section 402(a) of the Magnuson-Stevens Act (16 U.S.C. 1801, *et seq.*); 3) Responses to this information request are confidential under section 402(b) of the Magnuson-Stevens Act. They are also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics.

<h2 style="margin: 0;">Application for Rockfish Cooperative Allocation</h2>	U.S. Dept. of Commerce/ NOAA National Marine Fisheries Service Restricted Access Management P.O. Box 21668 Juneau, AK 99802-1668 (800) 304-4846 toll free / 586-7202 in Juneau (907) 586-7354 fax
A Rockfish Cooperative that submits a complete application that is approved by NMFS will receive a Rockfish Cooperative allocation that establishes an annual catch limit of primary and secondary species based on the collective catch history holdings of the LLPs held and contributed by the members of the Rockfish Cooperative. A Rockfish Cooperative allocation will list the amount of allocation, by fishery, held by the Rockfish Cooperative and identify the members of the Rockfish Cooperative.	

This application for a Rockfish Cooperative allocation must be submitted annually by each Rockfish Cooperative and received by NMFS no later than **September 1**.

BLOCK A. COOPERATIVE INFORMATION			
1. Rockfish Cooperative's legal name	2. Type of business entity under which the Rockfish Cooperative is organized		
	3. State in which the Rockfish Cooperative is legally registered as a business entity		
4. Printed name of designated representative	5. Permanent business address		
6. Business telephone number	7. Business FAX number	8. e-mail address (if available)	
9. Signature of representative and date signed.			

BLOCK B. MEMBER INFORMATION	
<i>HARVESTER MEMBERS</i>	
1. Full name	2. NMFS Person ID
	3. LLP number(s)
4. Vessel Name	5. ADF&G vessel registration number
	6. USCG documentation number

<i>HARVESTER OWNERSHIP DOCUMENTATION</i>	
Enter the names of all persons, to the individual level, holding an ownership interest in the LLP license and the percentage ownership each person and individual holds in the LLP license.	
Name	% Ownership in LLP License

PROCESSOR MEMBERS	
1. Full name	2. NMFS Person ID
3. Processing Facility name	4. ADF&G processor code

PROCESSOR OWNERSHIP INFORMATION	
Provide the names of all persons, to the individual level, holding an ownership interest in the entity and the percentage ownership each person and individual holds in the processor.	
Name	% Ownership in Processor

BLOCK C. ATTACHMENTS
<p>For the application to be considered complete, the following documents must be attached to the application:</p> <ul style="list-style-type: none"> (1) A copy of the business license issued by the state in which the Rockfish Cooperative is registered as a business entity; (2) A copy of the articles of incorporation or partnership agreement of the Rockfish Cooperative; (3) A copy of the Rockfish Cooperative agreement signed by the members of the Rockfish Cooperative (if different from the articles of incorporation or partnership agreement of the Rockfish Cooperative). (4) Any article of incorporation or agreement submitted by the Rockfish Cooperative must include terms that specify that <ul style="list-style-type: none"> (i) the eligible processor may not participate in price setting negotiations except to the extent permitted by general antitrust law and (ii) the Rockfish Cooperative must establish a monitoring program sufficient to ensure compliance with the Rockfish Pilot Program.

BLOCK D - CERTIFICATION OF APPLICANT	
Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information is true, correct, and complete.	
1. Signature of Applicant (or Authorized Representative)	2. Date Signed
3. Printed Name of Applicant (or Authorized Representative); if representative, attach authorization	

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing the instructions, searching the existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Assistant Regional Administrator, Sustainable Fisheries Division, NOAA National Marine Fisheries Service, P.O. Box 21668, Juneau, AK 99802-1668.

ADDITIONAL INFORMATION

Before completing this form, please note the following: 1) Notwithstanding any other provision of law, no person is required to respond to, nor shall any person be subject 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; 2) This information is mandatory and is required to manage commercial fishing efforts under 50 CFR part 679 and under section 402(a) of the Magnuson-Stevens Act (16 U.S.C. 1801, *et seq.*); 3) Responses to this information request are confidential under section 402(b) of the Magnuson-Stevens Act. They are also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics.

Instructions for Application for Rockfish Cooperative Allocation

A Rockfish Cooperative that submits a complete application that is approved by NMFS will receive a Rockfish Cooperative allocation that establishes an annual catch limit of primary and secondary species based on the collective catch history holdings of the LLPs held and contributed by the members of the Rockfish Cooperative. A Rockfish Cooperative allocation will list the amount of allocation, by fishery, held by the Rockfish Cooperative and identify the members of the Rockfish Cooperative.

Type or print legibly in ink; retain a copy of completed application for your records. Completed forms should be mailed or faxed to:

**NMFS Alaska Region
Restricted Access Management
P.O. Box 21668
Juneau, AK 99802-1668**

FAX: (907) 586-7354

If you need additional information, contact Restricted Access Management at

(800) 304-4846 (#2) or (907) 586-7202 (#2).

Please allow at least 10 working days for your application to be processed. Items will be sent by first class mail, unless you provide alternate instructions *and* include a prepaid mailer with appropriate postage or corporate account number for express delivery.

Submit a completed application for a Rockfish Cooperative allocation, including all amendments, such that received by NMFS no later than September 1 to receive an allocation that may be used during the following calendar year.

BLOCK A. COOPERATIVE INFORMATION

- Legal name
- Type of business entity under which organized
- State in which legally registered as a business entity
- Printed name and signature of designated representative and date signed
- Permanent business address, telephone number, facsimile number, and e-mail address (if available)

BLOCK B. MEMBER INFORMATION

Harvester members

- Full name and NMFS Person ID
- LLP license number(s)
- Name, ADF&G vessel registration number, and USCG documentation number of vessel(s)

Harvester ownership documentation

- Names of all persons, to the individual level, holding an ownership interest in the LLP
- Percentage ownership each person and individual holds in the LLP.

Processor members

- Full name and NMFS Person ID
- Facility name and ADF&G processor code

Processor ownership documentation

- Names of all persons, to the individual level, holding an ownership interest in the processor
- Percentage ownership each person and individual holds in the processor.

BLOCK C. ATTACHMENTS

A copy of the business license issued by the state in which the Cooperative is registered as a business entity;

A copy of the articles of incorporation or partnership agreement of the Rockfish Cooperative

A copy of the agreement signed by the members of the Rockfish Cooperative (if different from the articles of incorporation or partnership agreement)

Any article of incorporation or agreement submitted by the Rockfish Cooperative must include terms that specify that:

The eligible processor may not participate in price setting negotiations except to the extent permitted by general antitrust law; and

The Rockfish Cooperative must establish a monitoring program sufficient to ensure compliance with the Rockfish Pilot Program.

BLOCK D. APPLICANT CERTIFICATION

Signature of applicant and date signed

Printed name of applicant (or authorized representative); if representative, attach authorization

Application for Rockfish Limited Access Fishery	U.S. Dept. of Commerce/ NOAA National Marine Fisheries Service Restricted Access Management P.O. Box 21668 Juneau, AK 99802-1668 (800) 304-4846 toll free / 586-7202 in Juneau (907) 586-7354 fax
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This application must be submitted annually and received by NMFS no later than **September 1** for participation during the following calendar year.

BLOCK A. APPLICANT INFORMATION		
1. Applicant name	2. NMFS person ID	
	3. Tax ID or social security number* (required)	
4. Permanent business mailing address		
5. Business telephone number	6. Business FAX number	7. e-mail address (if available)
8. Is applicant an Eligible Rockfish Harvester? <input type="checkbox"/> YES <input type="checkbox"/> NO		
9. Is applicant participating in the Limited Access Fishery? <input type="checkbox"/> YES <input type="checkbox"/> NO		
<small>*The Debt Collection Improvement Act, in Section 7701 of title 31, United States Code requires collection of this information from each person doing business with a federal agency. This information is used for purposes of collecting and reporting any delinquent amounts arising out of such person's relationship with the government. This information is also used to verify the identity of the applicant(s) and to accurately retrieve confidential records related to federal commercial fishery permits issued under 50 CFR Part 679.</small>		

BLOCK B. VESSEL INFORMATION			
Vessel Name	ADF&G No.	USCG No.	LLP License No.

BLOCK C. HARVESTER OWNERSHIP DOCUMENTATION	
Enter the names of all persons, to the individual level, holding an ownership interest in the LLP license and the percentage ownership each person and individual holds in the LLP license.	
Name	% Ownership in LLP License

BLOCK D. APPLICANT CERTIFICATION	
Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information is true, correct, and complete.	
1. Signature of Applicant (or Authorized Representative)	2. Date
3. Printed Name of Applicant (or Authorized Representative); if representative, attach authorization	

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing the instructions, searching the existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Assistant Regional Administrator, Sustainable Fisheries Division, NOAA National Marine Fisheries Service, P.O. Box 21668, Juneau, AK 99802-1668.

ADDITIONAL INFORMATION

Before completing this form, please note the following: 1) Notwithstanding any other provision of law, no person is required to respond to, nor shall any person be subject 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; 2) This information is mandatory and is required to manage commercial fishing efforts under 50 CFR part 679 and under section 402(a) of the Magnuson-Stevens Act (16 U.S.C. 1801, *et seq.*); 3) Responses to this information request are confidential under section 402(b) of the Magnuson-Stevens Act. They are also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics.

**Instructions for
Application for
Limited Access Rockfish Fishery**

A person is eligible to participate in the Rockfish Program as an Eligible Rockfish Harvester if that person:

- (1) holds a permanent fully transferrable LLP license endorsed for Central Gulf of Alaska groundfish with a Legal Rockfish Landing of any Primary Rockfish Species attributed to that LLP license at the time of Application to Participate in the Rockfish Program; and
- (2) submits a timely Application to Participate in the Rockfish Program that is approved by NMFS;

A person is eligible to participate in the Rockfish Program as an Eligible Rockfish Processor if that person:

- (1) holds the processing history of a shoreside processor or stationary floating processor that received not less than 250 metric tons in round weight equivalent of aggregate Legal Rockfish Landings of Primary Rockfish Species each calendar year in any four of the five calendar years beginning 1996 through 2000 during the season dates for that Primary Rockfish Species as established in Table 28 to part 679;
- (2) submits a timely Application to Participate in the Rockfish Program that is approved by NMFS; and
- (3) that person or his successor-in-interest exists at the time of Application to Participate in the Rockfish Program.

An eligible rockfish harvester or eligible rockfish processor may fish in the limited access fishery if that person chooses not, or cannot, participate in a cooperative or the opt-out fishery. Unlike the cooperative fishery, there is no guarantee, no exclusive harvest privilege, to the annual catch amount derived from an eligible rockfish harvester's catch history allocation will be caught by that person. The amount of primary rockfish available to the limited access fishery is equal to the sum of all of the annual catch amounts of all eligible rockfish harvesters in that sector. There is one limited access amount for the catcher vessel sector, and one limited access amount for the catcher/processor sector. This amount is a limit, the maximum catch in the limited access fishery and all participants in the limited access fishery compete for this amount.

The Rockfish Program Fishery – Limited Access Fishery is authorized from 1200 hours, A.l.t., July 1 through 1200 hours, A.l.t., November 15. The fishery closes once the allocation is met or exceeded. If the annual catch amount assigned to the fishery is small, and forecast harvest rate is high, NMFS may not open a limited access fishery if it is likely that participants in the limited access fishery would exceed their allocation.

This application must be submitted annually and received by NMFS no later than **September 1** for participation during the following calendar year.

Type or print legibly in ink; retain a copy of completed application for your records. Completed forms should be mailed or faxed to:

**NMFS Alaska Region
Restricted Access Management
P.O. Box 21668
Juneau, AK 99802-1668**

FAX: (907) 586-7354

If you need additional information, contact Restricted Access Management at

(800) 304-4846 (#2) or (907) 586-7202 (#2).

Application for Entry Level Rockfish Fishery
Page 3 of 4

Please allow at least 10 working days for your application to be processed. Items will be sent by first class mail, unless you provide alternate instructions *and* include a prepaid mailer with appropriate postage or corporate account number for express delivery.

BLOCK A. APPLICANT INFORMATION

Name and NMFS person ID (if applicable)
Tax ID or social security number* (required)

*The Debt Collection Improvement Act, in Section 7701 of title 31, United States Code requires collection of this information from each person doing business with a federal agency. This information is used for purposes of collecting and reporting any delinquent amounts arising out of such person's relationship with the government. This information is also used to verify the identity of the applicant(s) and to accurately retrieve confidential records related to federal commercial fishery permits issued under 50 CFR Part 679.

Permanent business mailing address
Business telephone number, facsimile number, and e-mail address (if available);
Indicate (YES or NO) whether applicant is an Eligible Rockfish Harvester
Indicate (YES or NO) whether applicant is participating in the Limited Access Fishery

BLOCK B. VESSEL INFORMATION

Name, ADF&G vessel registration number, and USCG documentation number of the vessel
LLP license number(s) held by the applicant and used on that vessel.

BLOCK C. HARVESTER OWNERSHIP

Names of all persons, to the individual level, holding an ownership interest in the LLP
Percentage ownership each person and individual holds in the LLP.

BLOCK D. APPLICANT SIGNATURE AND DATE

Signature of applicant and date signed
Printed name of applicant (or authorized representative); if representative, attach authorization

<h2>Application to Opt Out of Rockfish Fishery</h2>	U.S. Dept. of Commerce/ NOAA National Marine Fisheries Service Restricted Access Management P.O. Box 21668 Juneau, AK 99802-1668 (800) 304-4846 toll free / 586-7202 in Juneau (907) 586-7354 fax
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Submit this application annually so that is received by NMFS no later than September 1 to allow that person to opt-out during the following calendar year.

BLOCK A. APPLICANT INFORMATION		
1. Applicant name	2. NMFS person ID	
	3. Tax ID or social security number* (required)	
4. Permanent business mailing address		
5. Business telephone number	6. Business FAX number	7. e-mail address (if available)
8. Is the applicant an Eligible Rockfish Harvester? <input type="checkbox"/> YES <input type="checkbox"/> NO		
9. Is the applicant opting-out of the Rockfish Pilot Program? <input type="checkbox"/> YES <input type="checkbox"/> NO		
10. Does the applicant hold an LLP with a Catch History Allocation assigned to the catcher/processor sector? <input type="checkbox"/> YES <input type="checkbox"/> NO		
<small>*The Debt Collection Improvement Act, in Section 7701 of title 31, United States Code requires collection of this information from each person doing business with a federal agency. This information is used for purposes of collecting and reporting any delinquent amounts arising out of such person's relationship with the government. This information is also used to verify the identity of the applicant(s) and to accurately retrieve confidential records related to federal commercial fishery permits issued under 50 CFR Part 679.</small>		

BLOCK B. VESSEL INFORMATION	
1. Name of vessel	2. ADF&G vessel registration number
	3. USCG documentation number
	4. LLP license number(s) held by the applicant and used on that vessel.

BLOCK C. HARVESTER OWNERSHIP DOCUMENTATION	
Enter the names of all persons, to the individual level, holding an ownership interest in the LLP license and the percentage ownership each person and individual holds in the LLP license.	
Name	% Ownership in LLP License

BLOCK D. APPLICANT CERTIFICATION	
Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information is true, correct, and complete.	
1. Signature of Applicant (or Authorized Representative)	2. Date
3. Printed Name of Applicant (or Authorized Representative); if representative, attach authorization	

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing the instructions, searching the existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Assistant Regional Administrator, Sustainable Fisheries Division, NOAA National Marine Fisheries Service, P.O. Box 21668, Juneau, AK 99802-1668.

ADDITIONAL INFORMATION

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Instructions
Application to Opt Out of Rockfish Fishery

An eligible rockfish harvester that holds an LLP license with a catch history allocation in the catcher/processor sector may choose to opt-out of many of the Program restrictions, although some restrictions under the program would still apply (e.g., the Sideboard restrictions). If an eligible rockfish harvester assigns an LLP license to the opt-out fishery, then that LLP license may not be used on a vessel that is participating in a cooperative, limited access fishery, of the entry level fishery. Eligible rockfish harvesters in the catcher vessel sector cannot assign an LLP license and its associated catch history to the opt-out fishery.

An Eligible Rockfish Harvester who wishes to Opt-out of the Rockfish Program for a calendar year with an LLP license assigned a Catch History Allocation in the Catcher/Processor Sector must submit an Application to Opt-out. Submit this application annually so that is received by NMFS no later than September 1 to allow that person to opt-out during the following calendar year.

Type or print legibly in ink; retain a copy of completed application for your records. Completed forms should be mailed or faxed to:

NMFS Alaska Region
Restricted Access Management
P.O. Box 21668
Juneau, AK 99802-1668

FAX: (907) 586-7354

If you need additional information, contact Restricted Access Management at **(800) 304-4846 (#2)** or **(907) 586-7202 (#2)**.

Please allow at least 10 working days for your application to be processed. Items will be sent by first class mail, unless you provide alternate instructions *and* include a prepaid mailer with appropriate postage or corporate account number for express delivery.

BLOCK A. APPLICANT INFORMATION

Name and NMFS person ID
Tax ID or social security number* (required)

*The Debt Collection Improvement Act, in Section 7701 of title 31, United States Code requires collection of this information from each person doing business with a federal agency. This information is used for purposes of collecting and reporting any delinquent amounts arising out of such person's relationship with the government. This information is also used to verify the identity of the applicant(s) and to accurately retrieve confidential records related to federal commercial fishery permits issued under 50 CFR Part 679.

Permanent business mailing address
Business telephone number, facsimile number, and e-mail address (if available);
Indicate (YES or NO) whether the applicant is an Eligible Rockfish Harvester.
Indicate (YES or NO) whether the applicant is opting-out of the Rockfish Pilot Program.
Indicate (YES or NO) whether the applicant holds an LLP with a Catch History Allocation assigned to the catcher/processor sector.

BLOCK B. VESSEL INFORMATION

Name, ADF&G vessel registration number, and USCG documentation number of the vessel
LLP license number(s) held by the applicant and used on that vessel.

BLOCK C. HARVESTER OWNERSHIP

Names of all persons, to the individual level, holding an ownership interest in the LLP license
Percentage ownership each person and individual holds in the LLP license.

BLOCK D. APPLICANT CERTIFICATION

Signature of applicant (or authorized representative) and date signed
Printed name of applicant (or authorized representative); if representative, attach authorization

<p>Application for Entry Level Rockfish Fishery</p>	<p>U.S. Dept. of Commerce/ NOAA National Marine Fisheries Service Restricted Access Management P.O. Box 21668 Juneau, AK 99802-1668 (800) 304-4846 toll free / 586-7202 in Juneau (907) 586-7354 fax</p>
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You must be a U.S. citizen or U.S. corporation, partnership, or other business entity to participate in the Entry Level Fishery as a harvester.

This application must be submitted annually and received by NMFS no later than **September 1** for participation during the following calendar year.

BLOCK A. APPLICANT INFORMATION		
1. Applicant name	2. NMFS person ID	
	3. Tax ID or social security number* (required)	
	4. Date of birth or date of incorporation (if Applicant is not an individual)	
5. Permanent business mailing address		
6. Business telephone number	7. Business FAX number	8. e-mail address (if available)
9. Is the Applicant a U.S. citizen: <input type="checkbox"/> YES <input type="checkbox"/> NO		
10. Is the Applicant a U.S. corporation, partnership, association, or other business entity: <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, enter date of incorporation: _____		
<small>*The Debt Collection Improvement Act, in Section 7701 of title 31, United States Code requires collection of this information from each person doing business with a federal agency. This information is used for purposes of collecting and reporting any delinquent amounts arising out of such person's relationship with the government. This information is also used to verify the identity of the applicant(s) and to accurately retrieve confidential records related to federal commercial fishery permits issued under 50 CFR Part 679.</small>		

BLOCK B. VESSEL INFORMATION			
Harvesters who are applying to participate in the Entry-Level Fishery must attach a statement from an Eligible Entry Level Processor that affirms that processor has a market for any rockfish delivered by that harvester in the Entry-Level Fishery			
Vessel Name	ADF&G No.	USCG No.	LLP License No.

BLOCK C. APPLICANT CERTIFICATION	
Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information is true, correct, and complete.	
1. Signature of Applicant (or Authorized Representative)	2. Date
3. Printed Name of Applicant (or Authorized Representative); if representative, attach authorization	

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing the instructions, searching the existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Assistant Regional Administrator, Sustainable Fisheries Division, NOAA National Marine Fisheries Service, P.O. Box 21668, Juneau, AK 99802-1668.

ADDITIONAL INFORMATION

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**Instructions for
Application for
Entry Level Rockfish Fishery**

A person is eligible to participate in the Rockfish Program as an Eligible Entry-Level Fishery Harvester if that person:

- (1) holds a permanent fully transferable LLP license endorsed for Central Gulf of Alaska groundfish at the time of Application for the Entry-Level Fishery;
- (2) submits a timely Application for the Entry-Level Fishery that is approved by NMFS; and
- (3) that person is not an Eligible Rockfish Harvester or Processor.

An entry level fishery is available for all persons who are not eligible rockfish harvesters or processors. This fishery is intended to provide opportunities for harvesters and processors who had not traditionally participated in the CGOA rockfish fisheries.

An Eligible Entry Level Harvester who wishes to participate in the Entry-Level Fishery must submit an Application for the Entry-Level Fishery. This application must be submitted annually and received by NMFS no later than **September 1** for participation during the following calendar year.

The Entry Level Fishery for Fixed gear vessels is authorized from 0001 hours, A.l.t., January 1 through 1200 hours, A.l.t., November 15.

The Entry Level Fishery for Trawl gear vessels is authorized from 1200 hours, A.l.t., May 1 through 1200 hours, A.l.t., November 15.

Type or print legibly in ink; retain a copy of completed application for your records. Completed forms should be mailed or faxed to:

**NMFS Alaska Region
Restricted Access Management
P.O. Box 21668
Juneau, AK 99802-1668**

FAX: (907) 586-7354

If you need additional information, contact Restricted Access Management at

(800) 304-4846 (#2) or (907) 586-7202 (#2).

Please allow at least 10 working days for your application to be processed. Items will be sent by first class mail, unless you provide alternate instructions *and* include a prepaid mailer with appropriate postage or corporate account number for express delivery.

Submit a completed application such that received by NMFS no later than September 1 to receive an allocation that may be used during the following calendar year.

BLOCK A. APPLICANT INFORMATION

Name and NMFS person ID (if applicable)
Tax ID or social security number* (required)

*The Debt Collection Improvement Act, in Section 7701 of title 31, United States Code requires collection of this information from each person doing business with a federal agency. This information is used for purposes of

Application for Entry Level Rockfish Fishery
Page 3 of 4

collecting and reporting any delinquent amounts arising out of such person's relationship with the government. This information is also used to verify the identity of the applicant(s) and to accurately retrieve confidential records related to federal commercial fishery permits issued under 50 CFR Part 679.

Permanent business mailing address

Business telephone number, facsimile number, and e-mail address (if available);

Indicate (YES or NO) whether applicant is a U.S. citizen; If YES, enter date of birth

Indicate (YES or NO) whether applicant is a U.S. corporation, partnership, association, or other business entity; If YES, enter the date of incorporation.

BLOCK B. VESSEL INFORMATION

List vessel information applicant intends to deploy

Name, ADF&G vessel registration number, and USCG documentation number of the vessel

LLP license number(s) held by the applicant and used on that vessel.

Harvesters who are applying to participate in the Entry-Level Fishery must attach a statement from an

Eligible Entry Level Processor that affirms that processor has a market for any rockfish delivered by that harvester in the Entry-Level Fishery

BLOCK C. APPLICANT SIGNATURE AND DATE

Signature of applicant and date signed

Printed name of applicant (or authorized representative); if representative, attach authorization

**Application for Inter-Cooperative
 Transfer Rockfish Fishery**

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

BLOCK A. IDENTIFICATION OF TRANSFEROR

1. Name of Rockfish Cooperative		2. NMFS person ID
		3. LLP license number(s)
4. Name of designated representative		
5. Permanent business mailing address		6. Temporary business mailing address (if appropriate)
7. Business telephone number	8. Business FAX number	9. e-mail address (if available)

BLOCK B. IDENTIFICATION OF TRANSFEREE

1. Name of Transferee		2. NMFS person ID
3. Name of designated representative		
4. Permanent business mailing address		5. Temporary business mailing address (if appropriate)
6. Business telephone number	7. Business Fax Number	8. e-mail address (if available)

BLOCK C. TRANSFEREE OWNERSHIP DOCUMENTATION	
Enter the names of all persons, to the individual level, holding an ownership interest in the LLP license and the percentage ownership each person and individual holds in the LLP license.	
Name	% Ownership in LLP License

BLOCK C. IDENTIFICATION OF ROCKFISH COOPERATIVE MEMBER <i>(to whose use cap the Rockfish Cooperative catch history will be applied for purposes of applying the use cap.)</i>	
1. Name	2. NMFS person ID

BLOCK D. ANNUAL CATCH AMOUNT TO BE TRANSFERRED		
Identify the type and amount of Primary Species, Secondary Species, or Rockfish Halibut PSC to be transferred.		
Type	Amount (lb or mt, indicate which)	Species to be Transferred

BLOCK E. CERTIFICATION OF TRANSFEROR	
Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information is true, correct, and complete.	
1. Signature of Applicant (or Authorized Representative)	2. Date
3. Printed Name of Applicant (or Authorized Representative); if representative, attach authorization)	

BLOCK F. CERTIFICATION OF TRANSFEREE

Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information is true, correct, and complete.

1. Signature of Applicant (or Authorized Representative)	2. Date
3. Printed Name of Applicant (or Authorized Representative); if representative, attach authorization)	

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing the instructions, searching the existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Assistant Regional Administrator, Sustainable Fisheries Division, NOAA National Marine Fisheries Service, P.O. Box 21668, Juneau, AK 99802-1668.

ADDITIONAL INFORMATION

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Instructions
Application for Inter-Cooperative Transfer
Rockfish Fishery

Once NMFS issues an annual catch amount to a cooperative, it may be fished by members of the cooperative, or transferred to another cooperative. A cooperative may transfer an annual catch amount from one cooperative to another cooperative. However, a cooperative in the catcher vessel sector may not transfer an annual catch amount to a cooperative in the catcher/processor sector.

This transfer of an annual catch amount is only valid during the calendar year of the transfer. A cooperative may only transfer or receive by transfer an annual catch amount if the cooperative:

(1) Notifies NMFS. A transfer is not effective until NMFS has been notified and NMFS has sent confirmation to the transferor and the transferee.

(2) Identifies the amount and type or annual catch amount transferred and the cooperative and cooperative member to which that annual catch amount is transferred. An annual catch amount received by a cooperative has to be attributed to a member of that cooperative to apply the use caps.

(3) The transfer doesn't cause the receiving cooperative to exceed its use cap limitations. The cooperative is responsible for ensuring that any transfer does not exceed cooperative use cap provisions.

To standardize the reporting of information, transfers must be completed using this application for inter-cooperative transfer form.

Type or print legibly in ink; retain a copy of completed application for your records. Completed forms should be mailed or faxed to:

NMFS Alaska Region
Restricted Access Management
P.O. Box 21668
Juneau, AK 99802-1668

FAX: (907) 586-7354

If you need additional information, contact Restricted Access Management at **(800) 304-4846 (#2)** or **(907) 586-7202 (#2)**.

Please allow at least 10 working days for your application to be processed. Items will be sent by first class mail, unless you provide alternate instructions *and* include a prepaid mailer with appropriate postage or corporate account number for express delivery.

A complete transfer of catch history or halibut PSC allocation issued to a Rockfish Cooperative requires that the following information be provided to NMFS:

BLOCK A. IDENTIFICATION OF TRANSFEROR (BUYER).

Name, NMFS Person ID, and LLP license number(s) assigned to that Rockfish Cooperative

Name of designated representative

Permanent business mailing address (and temporary mailing address, if appropriate)

Business telephone number, fax number, and e-mail address (if available)

BLOCK B. IDENTIFICATION OF TRANSFEREE (SELLER)

Name and NMFS Person ID

Name of designated representative

Permanent business mailing address (and temporary mailing address, if appropriate)

Application for Inter-cooperative Transfer

Page 4 of 5

Business telephone number, fax number, and e-mail address (if available)

BLOCK C. TRANSFEREE OWNERSHIP DOCUMENTATION

Names of all persons, to the individual level, holding an ownership interest in the LLP license
Percentage ownership each person and individual holds in the LLP license.

BLOCK D. IDENTIFICATION OF ROCKFISH COOPERATIVE MEMBER.

Name and NMFS person ID of the member to whose use cap the Rockfish Cooperative catch history will be applied for purposes of applying the use cap.

BLOCK E. ANNUAL CATCH AMOUNT TO BE TRANSFERRED

Identify the type and amount of Primary Species, Secondary Species, or Rockfish Halibut PSC to be transferred.

BLOCK F. CERTIFICATION OF TRANSFEROR.

Signature of transferor and date
Printed name of transferor (or authorized representative); if representative, attach authorization

BLOCK G. CERTIFICATION OF TRANSFEREE.

Signature of transferee and date
Printed name of transferee (or authorized representative); if representative, attach authorization

**Application to Transfer
 Eligible Rockfish Processor Permit**

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

A transfer is not effective until approved by NMFS. NMFS will notify the transferor and transferee once the application has been received and approved. A complete transfer of processor eligibility requires that the following information be provided to NMFS:

BLOCK A. IDENTIFICATION OF TRANSFEROR (BUYER)

1. Transferor name		2. NMFS person ID	
3. Name of Designated Representative			
4. Permanent business mailing address		5. Temporary business mailing address (if appropriate)	
6. Business telephone number	7. Business FAX number	8. e-mail address (if available)	
9. Processing Facility(ies) for which processor eligibility applies			
Facility name	ADF&G processor code	Name of the community in which processor eligibility applies	

BLOCK B. IDENTIFICATION OF TRANSFEEE (SELLER)

1. Transferee Name		2. NMFS Person ID	
3. Name of Designated Representative			
4. Permanent business mailing address		5. Temporary business mailing address (if appropriate)	
6. Business telephone number	7. Business FAX number	8. e-mail address (if available)	
9. Processing Facility(ies) for which processor eligibility applies			
Facility Name	ADF&G processor code	Name of the community in which processor eligibility applies	

BLOCK C. CERTIFICATION OF TRANSFEROR

Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information is true, correct, and complete.	
1. Signature of Applicant (or Authorized Representative)	2. Date
3. Printed Name of Applicant (or Authorized Representative); if representative, attach authorization	

BLOCK D. CERTIFICATION OF TRANSFEROR	
Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information is true, correct, and complete.	
1. Signature of Applicant (or Authorized Representative)	2. Date
3. Printed Name of Applicant (or Authorized Representative); if representative, attach authorization	

PUBLIC REPORTING BURDEN STATEMENT

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Instructions
Application to Transfer Processor Eligibility

Eligible rockfish processors may transfer their eligibility to another person. Eligible rockfish processors cannot suballocate their eligibility or the legal landings that were used to qualify that processor. Any transfer of rockfish processor eligibility includes the entire processing history and eligibility and the specific years that were originally selected to establish linkages with eligible rockfish harvesters. Additionally, any transfer of processor eligibility cannot be made to a person who will use that processor eligibility to form a cooperative that would receive fish outside of the community where the processor eligibility was originally earned. This restriction limits the number of potentially eligible processors, prevents a processor from forming cooperatives outside of the communities in which it historically operated, but provides existing holders of processor eligibility the ability to transfer this eligibility to others.

To standardize the reporting of information, transfers must be completed using an application for inter-cooperative transfer form available on the NMFS Alaska Region website or by directly contacting NMFS.

Type or print legibly in ink; retain a copy of completed application for your records. Completed forms should be mailed or faxed to:

NMFS Alaska Region
Restricted Access Management
P.O. Box 21668
Juneau, AK 99802-1668

FAX: (907) 586-7354

If you need additional information, contact Restricted Access Management at **(800) 304-4846 (#2)** or **(907) 586-7202 (#2)**.

Please allow at least 10 working days for your application to be processed. Items will be sent by first class mail, unless you provide alternate instructions *and* include a prepaid mailer with appropriate postage or corporate account number for express delivery.

BLOCK A. IDENTIFICATION OF TRANSFEROR (BUYER).

Name and NMFS Person ID
Permanent business mailing address (and temporary mailing address, if appropriate)
Business telephone number, fax number, and e-mail address (if available)
Facility name and ADF&G processor code for each facility for which processor eligibility applies
Name of the community in which that processor eligibility applies.

BLOCK B. IDENTIFICATION OF TRANSFEREE.

Name and NMFS Person ID
Name of designated representative
Permanent business mailing address (and temporary mailing address, if appropriate)
Business telephone number, fax number, and e-mail address (if available)
Facility name and ADF&G processor code for each facility for which processor eligibility applies
Name of the community in which that processor eligibility will be used.

BLOCK C. CERTIFICATION OF TRANSFEROR.

Signature of transferor (or authorized representative) and date signed
Printed name of transferor (or authorized representative); if representative, attach authorization

BLOCK D. CERTIFICATION OF TRANSFeree.

Signature of transferee (or authorized representative) and date signed

Printed name of transferee (or authorized representative); if representative, attach authorization