

	<p>APPLICATION FOR IFQ/CDQ HIRED MASTER PERMIT APPLICATION</p>	<p>U.S. Dept. of Commerce/NOAA National Marine Fisheries Service Restricted Access Management Program 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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REQUIREMENTS FOR COMPLETE APPLICATION

***This application will not be processed unless the following information is provided:**

- **Proof of vessel ownership by the IFQ Permitholder:**
 - For US Coast Guard documented vessels, a complete copy of the Coast Guard Abstract of Title
 - For an undocumented vessel, a copy of the State of Alaska vessel license or registration
- **If the IFQ Permitholder is not the person named on the Abstract of Title or State of Alaska vessel license or registration:**
 - Documentation establishing indirect ownership such as corporate annual reports, meeting minutes, stock certificates, etc.

**Note: The only exceptions are for Category A IFQ Permitholders and CDQ Permit holders*

BLOCK A --PURPOSE OF APPLICATION

Add Permit Holder [] Delete Permitholder []
 Do you wish the hired master permit(s) to be mailed directly to the hired master(s)? Yes [] No []
 Indicate permit(s) to which this action applies: _____

Sablefish Permit Number(s) _____ Category: A [<input type="checkbox"/>] B [<input type="checkbox"/>] C [<input type="checkbox"/>] D [<input type="checkbox"/>]	Halibut Permit Number(s) _____ Category: A [<input type="checkbox"/>] B [<input type="checkbox"/>] C [<input type="checkbox"/>] D [<input type="checkbox"/>]
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BLOCK B --IFQ/CDQ PERMITHOLDER INFORMATION

1. Name of IFQ Permit Holder:	2. NMFS Person ID:
3. SSN (optional) or TAX ID:	4. Business Mailing Address: Permanent [<input type="checkbox"/>] Temporary [<input type="checkbox"/>]
5. Home Phone:	6. Business Phone:
7. Fax:	

BLOCK C -- IDENTIFICATION OF VESSEL UPON WHICH IFQ/CDQ HALIBUT OR SABLEFISH WILL BE FISHED

1. Vessel Name:	2. LOA:	3. ADF&G Number:	4. USCG Number:
5. Does the IFQ Permit Holder hold an ownership interest of at least 20% in the named vessel? Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]			

NOTE: TO DEMONSTRATE PERCENT OF VESSEL OWNERSHIP BY IFQ PERMIT HOLDER DOCUMENTATION OF OWNERSHIP MUST BE INCLUDED WITH THIS APPLICATION:

- 1) FOR USCG DOCUMENTED VESSELS, A COPY OF THE COAST GUARD ABSTRACT OF TITLE;
- 2) FOR AN UNDOCUMENTED VESSEL, A COPY OF THE STATE OF ALASKA VESSEL LICENSE OR REGISTRATION THAT LISTS THE PERMIT HOLDER AS AN OWNER.

BLOCK D -- HIRED MASTER PERMITHOLDER INFORMATION

1. Full Name of Hired Master :		2. NMFS Person ID (if any):			
3. SSN (optional) or TAX ID:		4. Date of Birth:			
5. Business Mailing Address: Permanent [] Temporary []					
6. Home Phone:		7. Business Phone:		8. Fax:	

1. Full Name of Hired Master:		2. NMFS Person ID (if any):			
3. SSN or TAX ID:		4. Date of Birth:			
5. Business Mailing Address: Permanent [] Temporary []					
6. Home Phone:		7. Business Phone:		8. Fax:	

1. Full Name of Hired Master:		2. NMFS Person ID (if any):			
3. SSN or TAX ID:		4. Date of Birth:			
5. Business Mailing Address: Permanent [] Temporary []					
6. Home Phone:		7. Business Phone:		8. Fax:	

BLOCK E - CERTIFICATION OF IFQ PERMITHOLDER AND NOTARY

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 Agent:		2. Date:	
3. Printed Name of Applicant or Authorized Agent (Note: If this is completed by an agent, attach authorization):			
4. Notary Public Signature: ATTEST		5. Affix Notary Stamp or Seal Below	
6. Commission Expires:			



INSTRUCTIONS
Application for IFQ/CDQ Hired Master Permit Application

GENERAL INSTRUCTIONS

This application must be used to obtain Pacific halibut and sablefish Individual Fishing Quota/Community Development Quota (IFQ/CDQ) permits for hired skippers where authorized under regulations at 50 CFR Part 679; and to obtain permits for halibut CDQ fishing. A separate application must be completed for **each vessel**.

- Type or print information legibly in ink and retain a copy of completed application for your records.
- Mail completed forms and proof of vessel ownership to: **NMFS Alaska Region, Restricted Access Management, P.O. Box 21668, Juneau, AK 99802-1668. Or 709 West 9th Street, Room 713, Juneau, AK 999801**
- If you need additional information, call Restricted Access Management (RAM) 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 to the hired skipper's permanent address**, unless you provide alternate instructions **and** include a prepaid mailer with appropriate postage or corporate account number for express delivery.

PROGRAM REQUIREMENTS

- IFQ permit holders who are not individuals **MUST** designate a hired master to fish their IFQ or obtain a permit to access their account. This person must be issued an IFQ Hired Master Permit. RAM will not automatically send a permit to the representative or the agent of non-individual quota share (QS) holders.
- With few exceptions, persons holding catcher vessel QS/IFQ hiring skippers **must own (either directly or indirectly) at least 20 percent of the vessel** upon which their hired skipper will fish the IFQ. Proof of vessel ownership is required to be submitted each year. Federal regulations at 50 CFR 679.42(i) and (j) define acceptable proof of ownership as:
 - **For a documented vessel**, owns a minimum 20-percent interest in the vessel as shown by the U.S. Abstract of Title issued by the U.S. Coast Guard that lists the permit holder as an owner and, if necessary to prove the required percentage ownership, other written documentation;
 - **For an undocumented vessel**, owns a minimum 20-percent interest in the vessel as shown by a State of Alaska vessel license or registration that lists the permit holder as an owner and, if necessary to show the required percentage ownership interest.
 - **Indirect ownership of vessel:** If the IFQ Permitholder is not the person listed on the U.S. Abstract of Title issued by the U.S. Coast Guard or the person listed on the State of Alaska vessel license or registration – documentation establishing an indirect ownership link with the vessel is required. Such documentation must be in the form of third party verification, and may include such things as corporate annual reports, corporate meeting minutes, stock certificates, tax returns, etc.
- Category "A" (freezer vessel) permit holders do not need to send proof of vessel ownership but **MUST** provide the vessel information requested in Block C.
- CDQ permit holders are not required to provide the vessel information requested in Block C.
- **Individual IFQ holders may not designate a skipper to harvest IFQ in Regulatory Areas 2C (for halibut) or SE (for sablefish).**

INSTRUCTIONS FOR COMPLETING FORM

BLOCK A - PURPOSE OF APPLICATION

- Check the appropriate box to designate your purpose for submitting this application.
- Sablefish or Halibut Permit Number & Category - Use the appropriate box to designate the species for which you wish to hire a skipper and circle the QS Vessel Category. Halibut and Sablefish permit numbers appear on IFQ fishing permits.

BLOCK B - PERMIT HOLDER INFORMATION

1. Name of IFQ Permit Holder - Name as it appears on your QS certificate or IFQ permit.
2. NMFS Person ID - The number assigned to the permit holder by RAM.
3. SSN or Tax ID

Privacy Act Statement: Federal regulations (at 50 CFR Part 679) authorize collection of this information. This information is used to verify the identity of the applicant(s) and to accurately retrieve confidential records related to federal commercial fishery permits. Where the requested information is a Social Security Number (SSN), disclosure is voluntary; in the event it is not provided, NMFS will assign a unique code that will identify the records.

4. Business Mailing Address - Include street or P.O. Box, city, state, and zip code. If you choose Permanent Address, we will update the official RAM database. If you choose Temporary Address, we will use it for this one application and we will not make any changes to the RAM database.
- 5-7. Phone and Fax - Home phone, business phone, and fax numbers where the permit holder or the authorized representative can be reached, including area codes.

BLOCK C - IDENTIFICATION OF VESSEL UPON WHICH IFQ/CDQ HALIBUT WILL BE FISHED

1. Name of the vessel on which the hired skipper will be fishing your IFQs.
2. Length overall of the vessel.
3. ADF&G number of the vessel.
4. Official USCG number of the vessel.
5. State whether or not you own 20 percent of the vessel identified in this block. With few exceptions, a minimum of 20 percent ownership in the vessel is required in order to hire a skipper to fish your IFQ.
 - For a documented vessel, you must submit a current copy of USCG Abstract of Title demonstrating the percentage of the permit holder's ownership interest in the named vessel. A current copy of the USCG Abstract of Title or Documentation can be obtained by contacting the USCG National Vessel Documentation Center at 2039 Stonewall Jackson Drive, Falling Waters, WV 25419 or by telephone at 1 (800) 799-8362 or (304) 271-2400.
 - For an undocumented vessel, you must submit a copy of a State of Alaska vessel license or registration demonstrating the permit holder's ownership interest in the named vessel.
 - Category "A" (freezer vessel) and CDQ permit holders must supply the vessel information requested in Block C, but do not need to send proof of vessel ownership.

BLOCK D – HIRED MASTER PERMITHOLDER INFORMATION

Complete each section for each permitholder you are requesting to have an IFQ Hired Master Permit.

NOTE: CDQ permit holders may attach to this application a list of requested Hired Master permitholders. The list **MUST** include the full name, address, and date of birth of each of the individuals listed.

1. Full Name of Hired Master - Name of the individual to be named on the hired master permit.
2. NMFS Person ID - The number assigned to the hired master permitholder by RAM.
3. SSN or Tax ID - See Privacy Act Statement above.
4. Date of Birth - Date of birth of the hired master permitholder.
5. Business Mailing Address - Include street or P.O. Box, city, state, and zip code. If you check Permanent Address, we will update the official RAM database. If you choose Temporary Address, we will use it for this one application and there will not be any changes to the RAM database. **Items will be sent by first class mail to the IFQ permitholder's permanent address** unless you provide alternate instructions. CDQ hired master permits will be sent to the CDQ corporation.
- 6-8. Phone, and Fax - Home phone, business phone, and fax numbers where hired master permitholder can be reached, including area code.

BLOCK E - CERTIFICATION OF IFQ PERMITHOLDER AND NOTARY

- 1-2. Sign, and date the application in the presence of a Notary Public. As a result of this requirement, **we cannot process faxed applications.**
3. Representatives of IFQ permitholders must submit proof of authorization signed by the IFQ permitholder to submit this application on their behalf.
- 4-6. A Notary Public other than the applicant must Attest (to certify in an official capacity by signature or oath) and affix Notary Stamp.

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 0.5 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 estimate or any other aspect of this collection of information, 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 (16 U.S.C. 1801, et seq.). They are also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics.
