

<p>Application for Rockfish Limited Access 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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This application must be submitted annually and received by NMFS no later than 1700 hours A.l.t. on **March 1** of the year for which the applicant wishes to participate in a Rockfish limited access fishery, or if sent by U.S. mail, the application must be postmarked by that time.

BLOCK A -- APPLICANT INFORMATION			
1. Applicant name		2. NMFS person ID	
		3. Tax ID number	
4. Permanent business mailing address			
5. Business telephone number	6. Business FAX number	7. e-mail address (if available)	
<p>8. Is applicant a U.S. citizen? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, enter date of birth _____</p> <p>9. Is the applicant a U.S. corporation, partnership, association, or other business entity?</p> <p style="padding-left: 40px;"><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If YES, enter date of incorporation: _____</p>			
<p>10. Is applicant an Eligible Rockfish Harvester?</p> <p style="padding-left: 80px;"><input type="checkbox"/> YES <input type="checkbox"/> NO</p>			
BLOCK B -- VESSEL IDENTIFICATION			
Vessel Name	ADF&G No.	USCG No.	LLP License No.

BLOCK C -- LLP HOLDERSHIP DOCUMENTATION

If the LLP License Holder (Applicant) is not an individual (i.e. is a corporation, partnership or some other entity) the name(s) of all owners of the Applicant must be provided, together with the percent of ownership. In the space below, enter all of the names of all of the owners of the Applicant, and indicate the percent of ownership. If a listed owner is not an individual, provide the same information for each such owner until all owners, and their percent of ownership, is revealed to the individual level.

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 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
Limited Access Rockfish Fishery**

This application must be submitted annually and received by NMFS no later than 1700 hours A.I.t. on **March 1** of the year for which the applicant wishes to participate in a Rockfish limited access fishery, or if sent by U.S. mail, the application must be postmarked by that time.

Eligible Rockfish Harvester

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

 Holds a permanent fully transferable 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

 Submits a timely Application to Participate in the Rockfish Program that is approved by NMFS;

Eligible Rockfish Processor

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

 Holds the processing history of a shoreside processor or stationary floating processor that 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;

 Submits a timely Application to Participate in the Rockfish Program that is approved by NMFS; and

 That person or his successor-in-interest exists at the time of Application to Participate in the Rockfish Program.

The Rockfish Program Fishery – Limited Access Fishery is authorized from 1200 hours, A.I.t., July 1 through 1200 hours, A.I.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.

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

Applicant’s name and NMFS person ID

Tax ID number

Permanent business mailing address, business telephone number, fax 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 date of incorporation.

Indicate (YES or NO) whether the applicant is an Eligible Rockfish Harvester (only Eligible Rockfish Harvesters may apply for this fishery)

BLOCK B VESSEL INFORMATION

Name, Alaska Department of fish and Game (ADF&G) vessel registration number, and

United States Coast Guard (USCG) documentation number of the vessel

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

BLOCK C LLP HOLDERSHIP

If the LLP License Holder (Applicant) is a non-individual (i.e., a corporation, partnership or other entity), provide the names of, and the percentage of ownership held by, all of its owners. Information should be provided to the individual level. See example below:

Name of Owner	% Interest
Joe Potpuller	25%
Alice Potpuller	25%
LLP Family Holdings, Inc.	50%
C. LLPholder	25% (of 50%)
R. LLPholder	25% (of 50%)
A. LLPholder	25% (of 50%)
B. LLPholder	25% (of 50%)

Duplicate the form, or attach a separate sheet of paper if necessary to display all of the Applicant’s owners (and owners of the Applicant’s owners to the individual level).

BLOCK D APPLICANT SIGNATURE AND DATE

Signature of applicant and date signed

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