

IFQ PERMIT HOLDER FEE SUBMISSION FORM

U.S. Department of Commerce/NOAA
National Marine Fisheries Service (NMFS)
Office of Operations, Management and Information (OMI)
P.O. Box 21668
Juneau, Alaska 99802-1668
(800) 304-4846 toll free / 586-7202 in Juneau



BLOCK A OVERPAYMENT

If your estimated Balance Due is less than zero (deficit), you **MUST** select one of the following options:

Apply Overpayment to Future Fee Liabilities **OR** Issue Refund

BLOCK B IDENTIFICATION OF IFQ PERMIT HOLDER

1. Name of IFQ Permit Holder	2. NMFS Person ID Number
3. SSN (required) or Tax ID Number	4. Business E-mail Address (if any)
5. Business Mailing Address Indicate if this address is: <input type="checkbox"/> Permanent or <input type="checkbox"/> Temporary	6. Business Telephone Number
	7. Business Fax Number

BLOCK C AGREEMENT WITH IFQ FEE LIABILITY SUMMARY

Check if you agree with your IFQ Fee Liability Summary YES NO

If you have checked YES, please date and sign your name where designated in Block D, complete Block E, and mail this Fee Submission Form with your payment.

If you have checked NO, complete Block F (Fee Calculation) using the fee calculation instructions and **provide documentation to support your calculations**. See pages two and three of the attached instructions for additional information.

BLOCK D -- SIGNATURE

1. Printed Name of IFQ Permit Holder or Authorized Agent	
2. Signature of IFQ Permit Holder or Authorized Agent	3. Date

BLOCK E -- METHOD OF PAYMENT

1. Personal Check Cashiers Check Money Order made payable to National Marine Fisheries Service (NMFS)
REMINDER! Sign your check and, if paying for multiple permit holders, include their completed/signed Fee Submission Forms.

2. Charge to the following: Visa Mastercard American Express Discover Novus

Card No: _____ Exp. Date: _____

Amount of Payment: _____ Name as Printed on Card: _____

Signature of Card Holder: _____ Date: _____

NMFS DOES NOT SEND VERIFICATION OF PAYMENT AND STRONGLY RECOMMENDS YOU RETAIN COPIES FOR YOUR RECORDS.

STOP!

**HAVE YOU COMPLETED BLOCK E AND INCLUDED PAYMENT OF YOUR IFQ FEE?
HAVE YOU MADE A COPY OF YOUR FEE SUBMISSION FORM AND CHECK/MONEY ORDER FOR YOUR RECORDS?**

BLOCK F FEE CALCULATION						
Permit Number	Date of Landing	Port Location	IFQ Pounds	Standard Ex-Vessel Price	Actual Ex-Vessel Price	Total
1. Sample	3/20/2000	Sitka	5000		\$ 2.20	\$11,000
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						
16.						
17. Ex-vessel Value Total (add lines 2-16):						
18. Plus Total Adjustments (retros, bonuses):						
19. Subtotal (add lines 17 and 18):						
20. Fee Liability * (multiply the published fee percentage by line 19):						
21. Less Pre-payments or Credits (if any):						
22. Balance Due (enter result after subtracting line 21 from 20):						
23. Enclosed Payment Amount:						

Note: You must submit adequate documentation supporting your revised fee liability. Examples of such documentation include valid fish tickets, sales receipts, or check stubs that clearly identify the IFQ landing amount, species, date, time, and ex-vessel value or price.

*Privacy Act Statement: Federal Regulation at 50 CFR Part 679, authorizes collection of the information requested in Block B. This information is used to verify the identity of the IFQ permit holder(s) and to accurately retrieve confidential records related to federal commercial fishery permits.

** Your fee liability is based on the total value received for IFQ halibut or sablefish landed on your IFQ permit during the IFQ fishing year. It should represent the total dollar value of IFQ pounds before any deductions are made for goods and services provided (i.e. bait, ice, fuel, repairs, machinery replacement, etc.), multiplied by the NMFS published fee percentage for the IFQ fishing year.

**INSTRUCTIONS FOR
IFQ PERMIT HOLDER FEE SUBMISSION FORM**

***BLOCK A
OVERPAYMENT***

If you have a credit from prepayments of the previous year or a balance due that is less than zero (deficit), you must choose to receive a refund or a credit on your future IFQ liabilities. All refunds will be issued out of the National Oceanic and Atmospheric Administration, Department of Finance, in Silver Spring, Maryland. **Please allow a minimum of eight weeks for your refund to be issued.** If you do not choose one of these options and have an amount due, it will automatically be credited to your IFQ Fee Liability Account.

***BLOCK B
IDENTIFICATION OF IFQ PERMIT HOLDER***

Enter the information requested below in the designated areas on the IFQ Permit Holder Fee Submission Form.

1. Name of IFQ Permit Holder: Full name of the individual, corporation, or partnership that is the holder of the permit.
2. NMFS Person ID Number: Identification number assigned to the permit holder by National Marine Fisheries Service (NMFS), Restricted Access Management (RAM).
3. SSN or Tax ID Number: **This information is required.**

The Debt Collection Improvement Act, 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 permit holder(s) and to accurately retrieve confidential records related to federal commercial fishery permits issued under 50 CFR Part 679.

4. Business E-mail Address: E-mail address, if available.
5. Business Mailing Address: Business mailing address where information should be sent; include street or post office box number, state, and zip code. Check whether the address provided is a permanent or temporary address. If the address is a Permanent Address, the address will be updated in the official RAM database; if the address is checked as a Temporary Address, it will be used on a one-time-only basis for processing this form and RAM's database will not be changed.
- 6-7. Business Telephone Number and Fax Number: Business telephone and fax numbers, including area codes. **Note:** It is important to provide a number where messages can be left to avoid delay in processing the Fee Submission Form if any questions arise.

***BLOCK C
AGREEMENT WITH IFQ FEE LIABILITY SUMMARY***

The IFQ permit holder must either accept the accuracy of the NMFS estimated fee liability associated with his or her IFQ landings for each IFQ permit, or calculate a revised IFQ fee liability.

If you indicated in Block C that you are not in agreement with the Summary, then Block F (Fee Calculation) must also be completed. **Note: You must submit adequate documentation supporting your revised fee liability. Examples of such documentation include valid fish tickets, sales receipts, or check stubs that clearly identify the IFQ landing amount, species, date, time, and ex-vessel value or price.**

***BLOCK D
SIGNATURE OF PERMIT HOLDER/AUTHORIZED AGENT***

1. Printed Name of IFQ Permit Holder or Authorized Agent: Print or type the full name of the permit holder or authorized agent signing on behalf of the permit holder. **Note:** If an agent is acting on behalf of the permit holder, written authorization signed by the permit holder must be submitted with the Fee Submission Form.
2. Signature of IFQ Permit Holder or Authorized Agent: The permit holder or authorized agent must sign and date the application where indicated. The application will not be considered without the signature of the permit holder or authorized agent.
3. Date: Indicate the date on which the Fee Submission Form is signed.

BLOCK E
METHOD OF PAYMENT

1. If paying by personal check, cashiers check, or money order, check the box that indicates the form of payment being used to pay your IFQ Fee Liability. A copy of your check or money order should be retained for your own records.
2. If paying by credit card, check the box that indicates the type of card used. **Note:** Only the credit cards listed are accepted for payment through NMFS/RAM at this time. The credit card number, expiration date, the name as printed on the card, and the card holder's signature must be completed for RAM to accept this form of payment. **If any of the required credit card information is missing, your payment WILL NOT be accepted.**

BLOCK F
FEE CALCULATION

Complete this block **ONLY** if you indicated in Block C that you did not agree with your IFQ Fee Liability Summary.

You must submit adequate documentation supporting your revised fee liability. Examples of such documentation include valid fish tickets, sales receipts, or check stubs that clearly identify the IFQ landing amount, species, date, time, and ex-vessel value or price.

2-16. **Permit Number:** Enter permit number(s).

Date of Landing: Enter date(s) the landing(s) was/were made.

Port Location: Enter the port(s) where landing(s) was/were made.

IFQ Pounds: Enter the number of IFQ pounds landed (include any retained pounds IFQ pounds is net weight for Halibut and round weight for Sablefish) on permit(s) for specific date(s).

Standard Ex-Vessel Price: Enter the standard ex-vessel price located on your IFQ Fee Liability Summary. You may use either the standard price /or the actual price for each landing in your summary.

Actual Ex-Vessel Price: Enter the actual ex-vessel value for this permit. You may use either the standard price or the actual price for each landing in your summary.

Total: Multiply the total pounds landed on the permit(s) by the standard or actual ex-vessel price to get the total for each landing.

17. **Ex-vessel Value Total:** Add lines 2 through 16 to get the subtotal of fees owed for all permits.

18. **Plus Total Adjustments:** Add total adjustments (retros or bonuses paid in current year for previous year).

19. **Subtotal:** Add lines 17 and 18.

20. **Fee Liability:** Multiply the permit(s) subtotal (line 19) by the published fee percentage.

21. **Less Pre-Payments or Credits:** Subtract any pre-payments or credits from line 20. If you have a pre-payment or credit, it will be indicated on your IFQ Fee Liability Summary.

22. **Balance Due:** This indicates your balance due or credit after subtracting line 21 from 20. If you show a credit, return to Block A and check whether you would like your credit refunded or have it applied to future fee liabilities. If you show a balance owed, fill in line 23.

23. **Enclosed Payment Amount:** If you show a balance owed, enter the amount of the payment you will be submitting.

Do not forget to sign and enclose your personal or certified check or money order and send it to the U.S. Dept. of Commerce/NOAA, National Marine Fisheries Service, Office of Operations, Management and Information (OMI), P.O. Box 21668, Juneau, Alaska 99802-1668. **If paying by credit card, make sure ALL requested card information is provided. Do not mail cash.**

We will not be sending receipts for payments received by check or money order, so we strongly recommend that you retain a copy of this completed form and your check/money order for your records. Only payments received by credit card will be sent generated computerized receipts after those payments are processed.

If you need assistance in completing this form, or you have questions about the IFQ Cost Recovery Program, or any other RAM program, call toll free at (800) 304-4846 (#2) or (907) 586-7202 (#2). RAM's program information, applications, and reports can also be located on the Alaska Region Internet site at www.fakr.noaa.gov.

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 2.0 hours per response, including the time for reviewing the instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to: NOAA National Marine Fisheries Service, Alaska Region, Attn: Assistant Regional Administrator, Sustainable Fisheries Division, P.O. Box 21668, Juneau, AK 99802 (Attn: Lori Gravel)

ADDITIONAL INFORMATION

Before completing this form please note the following: 1) Notwithstanding any other provision of the 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 effort 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.*). It is also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics.