

NOTICE OF OFFICE OF MANAGEMENT AND BUDGET ACTION

Date 06/04/2013

Department of Commerce
National Oceanic and Atmospheric Administration

FOR CERTIFYING OFFICIAL: Simon Szykman
FOR CLEARANCE OFFICER: Jennifer Jessup

In accordance with the Paperwork Reduction Act, OMB has taken action on your request received
06/04/2013

ACTION REQUESTED: Revision of a currently approved collection

TYPE OF REVIEW REQUESTED: Regular

ICR REFERENCE NUMBER: 201306-0648-001

AGENCY ICR TRACKING NUMBER:

TITLE: Alaska Community Quota Entity (CQE) Program

LIST OF INFORMATION COLLECTIONS: See next page

OMB ACTION: Approved without change

OMB CONTROL NUMBER: 0648-0665

The agency is required to display the OMB Control Number and inform respondents of its legal significance in accordance with 5 CFR 1320.5(b).

EXPIRATION DATE: 05/31/2016

DISCONTINUE DATE:

BURDEN:	RESPONSES	HOURS	COSTS
Previous	0	0	0
New	169	2,724	538
Difference			
Change due to New Statute	0	0	0
Change due to Agency Discretion	169	2,724	538
Change due to Agency Adjustment	0	0	0
Change due to PRA Violation	0	0	0

TERMS OF CLEARANCE:

OMB Authorizing Official: Dominic J. Mancini
Acting Deputy Administrator,
Office Of Information And Regulatory Affairs

List of ICs

IC Title	Form No.	Form Name	CFR Citation
Application for a Non-profit Corporation to be Designated as a Community Quota	NA	Application for a Non-Profit Corporation to be Designated as a Community Quota Entity	
Application for Transfer of QS/IFQ to or from a CQE	NA	Application to transfer QS to or from a CQE	
Application for a CQE to Receive a Non-trawl Groundfish LLP License	NA	Application for a CQE to receive a Non-Trawl Groundfish LLP license	
Community Quota Entity (CQE) Annual Report			50 CFR 679.4
CQE LLP Authorization letter			50 CFR 679.4
Application for Community Charter Halibut Permit (CCHP)	NA	Application for community or military charter halibut permit	
Application for Transfer Between IFQ and GAF by CQE, Respondent	NA	Application for transfer between IFQ and GAF	

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
ALASKA COMMUNITY QUOTA ENTITY (CQE) PROGRAM
OMB CONTROL NO. 0648-0665**

The National Marine Fisheries Service (NMFS) is resubmitting a request for a new information collection, with the Final Rule. This request describes requirements for nonprofit entities called Community Quota Entities (CQEs), to be created from elements of three (3) existing collections that formerly described the requirements for a CQE under different programs [associated Rule is RIN 0648-BB94].

There were minor changes to the regulations and to this request, based on public comments (see Question 8).

BACKGROUND

The groundfish fisheries in the Exclusive Economic Zone (EEZ) off Alaska are managed by NMFS under the authority of the [Magnuson-Stevens Fishery Conservation and Management Act](#), 16 U.S.C. 1801 *et seq.*, as amended in 2006 (Magnuson-Stevens Act).

Under the authority of the Magnuson-Stevens Act, the North Pacific Fishery Management Council (Council) developed Fishery Management Plans (FMPs) for the groundfish fisheries of the Gulf of Alaska management area (GOA) and Bering Sea and Aleutian Islands management area (BSAI). The Pacific halibut fishery off Alaska is managed by NMFS under the authority of the [Northern Pacific Halibut Act of 1982](#), and in coordination with annual fishery management measures adopted by the International Pacific Halibut Commission (IPHC) under the Convention between the United States and Canada for the Preservation of the Halibut Fishery of the Northern Pacific Ocean and Bering Sea (Convention).

The Council, under the authority of the Halibut Act (with respect to Pacific halibut) and the Magnuson-Stevens Act (with respect to sablefish), manages the fixed gear Pacific halibut and sablefish Individual Fishing Quota (IFQ) Program. The IFQ Program provides a limited access system for Pacific halibut in Convention waters in and off Alaska and sablefish fisheries in waters of the EEZ off Alaska. Regulations pursuant to the Convention are set forth at [50 CFR 300.60 through 300.65](#). Regulations implementing the IFQ program are set forth at [50 CFR 50 CFR part 679](#). Regulations listing the communities eligible under the CQE Program appear in Table 21 to 50 CFR Part 679.

The State of Alaska allows the Alaska Department of Economic Development, Financing Section to provide a loan program for CQE's to purchase halibut and sablefish IFQs. The CQE Program is a Federal program administered by NMFS, but the State of Alaska will provide assistance to eligible communities from three divisions within the Department of Commerce, Community, and Economic Development (DCED):

- ◆ The Division of Banking, Securities, and Corporations will be able to answer questions regarding how to setup a non-profit corporation. The Division of Banking, Securities, and Corporations home page is: <http://www.commerce.state.ak.us/bsc/home.htm>

- ◆ The Division of Community Advocacy will be able to answer questions regarding sample by-laws and provide a non-profit corporation handbook with ideas regarding how to set up a non-profit corporation. The Division of Community Advocacy home page is: <http://www.commerce.state.ak.us/dca/>
- ◆ The Department of Economic Development (DCED), Financing Section will be able to provide loan applications and explain the application requirements to obtain financing for halibut and sablefish IFQ's. The Financing Section home page is: <http://www.commerce.state.ak.us/investments/index.cfml>. Eligible communities can contact DCED to schedule workshops regarding the CQE program.

INTRODUCTION

Under GOA Amendment 66 (69 FR 23681, 04/30/2004), the Council modified the IFQ Program by revising the eligibility criteria to receive halibut and sablefish IFQ and quota share (QS) by transfer to allow eligible communities in the Gulf of Alaska (GOA) to establish non-profit entities to purchase and hold QS for lease to, and use by, community residents. This action allowed a distinct set of 42 remote coastal communities in the GOA that had historic participation in the halibut and sablefish fisheries to purchase and hold catcher vessel quota share (QS) in Areas 2C, 3A, and 3B.

Eligible communities must form nonprofit corporations, CQEs, to act on its behalf to purchase catcher vessel QS, and lease the annual IFQ resulting from the QS to community residents. In addition, two other Federal limited-access programs provide eligible CQEs an opportunity to improve their economies with program-related fishing privileges: the charter halibut limited access program (CHP) and the GOA Pacific cod endorsed non-trawl groundfish License Limitation Program (LLP). Under the CHP, a CQE may request a limited number of no-cost community permits to fish charter halibut. Under the LLP, a CQE may use a limited number of non-trawl groundfish licenses with Pacific cod endorsements.

The CQE permitted to purchase and hold the QS for eligible communities must be a new non-profit entity incorporated under the State of Alaska or a new non-profit entity formed by an aggregation of several eligible communities. The non-profit must have been incorporated after April 10, 2002. The non-profit corporation must apply to NMFS for recognition as a CQE and must have the written approval of the community. Upon approval by NMFS, the CQE may buy, sell, and hold halibut and sablefish QS for the community.

CQE Program Checklist

- ◆ Review Non-profit Community Association Handbook from Division of Community Advocacy.
- ◆ Follow the directions for forming a Domestic Non-profit Alaskan Corporation at www.commerce.state.ak.us/bsc/corpdoc.htm. Complete and file an application to form a non-profit corporation with the State of Alaska at www.commerce.state.ak.us/bsc/pub/08-405.pdf

- ◆ Review the NMFS Community Quota Program website at www.fakr.noaa.gov/ram/cqp.htm. Complete and file a CQE Application with NMFS at www.fakr.noaa.gov/ram/cqp/CQEStatus.pdf
- ◆ To obtain financing a CQE may contact a local financial institution or may contact the Department of Economic Development, Financing Section to discuss financing terms offered through the Commercial Fishing Revolving Loan Fund.

NMFS implemented the CQE Program through combination of three separate information collections, each of which contained other elements not related to the CQE. The CQE elements from these collections are brought together into one new CQE collection; the elements are moved from:

License Limitation Program [see OMB Control No. 0648-0334]

The License Limitation Program (LLP) authorizes CQEs for eligible communities to request non-trawl gear groundfish LLP licenses endorsed for Pacific cod in the central or western Gulf of Alaska. Residency and other requirements exist for community LLP Users, and the CQEs have an annual reporting requirement on permit use.

Individual Fishing Quota Community Quota Program [see OMB Control No. 0648-0272]

The Individual Fishing Quota (IFQ) Community Quota Program authorizes CQEs to purchase commercial halibut and sablefish Quota Share (QS) for lease to residents of the eligible community. A CQE that meets specific criteria to receive transferred halibut or sablefish QS on behalf of an eligible community may lease the resulting IFQ to persons who are residents of the eligible community. NMFS Alaska Region administers the IFQ Program. Regulations pursuant to the Convention are set forth at 50 CFR 300.60 through 300.65. Regulations implementing the IFQ program are set forth at 50 CFR part 679.

Charter Halibut Limited Access Program and Community Permits

[see OMB Control No. 0648-0592]

Under the Charter Halibut Limited Access Program (CHLAP) eligible CQEs may request community charter halibut permits (CHP) for use in IPHC Areas 2C (Southeast Alaska) and 3A (Central Gulf of Alaska). The CQE designates charter operators to use its community CHPs, although the CHP itself is retained by the CQE. A charter vessel operator using a Community CHP is subject to all charter fishing regulations, and must either begin or end the charter vessel fishing trip within the community designated on the permit.

A. JUSTIFICATION

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

A CQE fishing program conveys specific regulated privileges to a CQE eligible community as described for a community CHP permit at §300.67 (k), halibut and sablefish IFQ and QS at §679.41 (1)(3), and a groundfish LLP license with non-trawl Pacific cod gear endorsement at §679.4(k)(iv)(F)(2).

NMFS would provide fishing opportunities for residents of fishery-dependent communities and would place CQE regulations into one section of regulations (50 CFR 679.5(t)) instead of three, with the following objectives:

- ◆ To align technically with the Council's intent
- ◆ To improve the clarity and effectiveness of the IFQ Program and CQE regulations
- ◆ To promote the objectives of the Magnuson-Stevens Act with respect to the IFQ fisheries.

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.

The CQE Program allocates a portion of the quotas for groundfish, halibut, crab, and prohibited species in the Bering Sea and Aleutian Islands Management Area (BSAI). Forty-two eligible Western Alaska communities are eligible in the IFQ Program: 21 are in Southeast Alaska (Area 2C) and 21 are in Southcentral Alaska (14 in Area 3A and 7 in Area 3B); an additional three communities are eligible, making a total of 45. The allocations provide communities the means for starting or supporting commercial fisheries business activities that will result in an ongoing, regionally based, fisheries-related economy. A non-profit corporate entity that meets specific criteria to receive transferred halibut or sablefish QS on behalf of an eligible community may lease the resulting IFQ to persons who are residents of the eligible community.

A CQE representing an eligible community located within IFQ Program Areas 3A or 3B is prohibited from purchasing QS in Area 2C (Southeast Alaska) on behalf of that community. The Council noted that 21 of the 42 communities eligible to participate in this program are located in Area 2C. Allowing CQEs in Areas 3A and 3B to purchase QS in Area 2C would increase the competition of QS and could adversely affect the price and availability of QS among Area 2C communities. Likewise, a CQE representing an eligible community within Area 2C is prohibited from purchasing and using QS in Area 3B (Western GOA) on behalf of that community. This limitation applies because residents from communities located in Area 2C traditionally did not fish in Area 3B.

Communities eligible to participate in the CQE Program must meet all of the following criteria:

- ◆ Is a municipality or census designated place, as defined in the 2000 United States Census, located on the GOA coast of the North Pacific Ocean
- ◆ Has a population of not less than 20 and not more than 1,500 persons based on the 2000 United States Census
- ◆ Have direct saltwater access
- ◆ Is not accessible by road to a community larger than 1,500 persons based on the 2000 United States Census

- ◆ Has had a resident of that community with at least one commercial landing of halibut or sablefish made during the period from 1980 through 2000, as documented by the State of Alaska Commercial Fisheries Entry Commission

- ◆ Is a community that is listed in Table 21 to 50 CFR 679.

This action would add three IFQ Program eligible communities to the CQE Program (for a total of 45) and allow CQEs in halibut regulatory area 3A (Area 3A) to purchase D category halibut QS.

There are currently 95 CQE eligible communities (45 IFQ & QS halibut and sablefish, 32 charter halibut, and 21 LLP communities), although only a few communities are currently participating. Twenty-nine CQEs are currently registered.

Each of the eligible communities must designate a CQE to represent it; only 28 of the 45 IFQ Program have done so. Of these 28 communities with CQEs, only a few have actually applied for or received any permits. Only 2 have obtained halibut QS by transfer. Approximately 16 of these have obtained charter halibut permits, and a few have obtained LLP groundfish licenses.

Table 21 to Part 679 – Eligible communities, community governing body that recommends the CQE, and the fishing programs and associated areas where a CQE eligible community may be permitted to participate.

Eligible GOA community	Community governing body that recommends the CQE	May use halibut QS only in halibut IFQ regulatory		May participate in the Charter Halibut Limited Access Program		Maximum number of Pacific cod endorsed non-trawl groundfish licenses that may be granted	
		Area 2C, 3A	Area 3A, 3B	Area 2C	Area 3A	Central GOA	Western GOA
Akiok	City of Akiok.		X		X	2	
Angoon	City of Angoon.	X		X			
Chenega Bay	Chenega IRA Village.		X		X	2	
Chignik	City of Chignik.		X			3	
Chignik Lagoon	Chignik Lagoon Village Council.		X			4	
Chignik Lake	Chignik Lake Traditional Council.		X			2	
Coffman Cove	City of Coffman Cove.	X		X			
Cold Bay	City of Cold Bay		X				2
Craig	City of Craig.	X					
Edna Bay	Edna Bay Community Association.	X		X			
Elfin Cove	Community of Elfin Cove.	X					
Game Creek	N/A	X		X			

Eligible GOA community	Community governing body that recommends the CQE	May use halibut QS only in halibut IFQ regulatory		May participate in the Charter Halibut Limited Access Program		Maximum number of Pacific cod endorsed non-trawl groundfish licenses that may be granted	
		Area 2C, 3A	Area 3A, 3B	Area 2C	Area 3A	Central GOA	Western GOA
Gustavus	Gustavus Community Association.	X					
Halibut Cove	N/A.		X		X	2	
Hollis	Hollis Community Council.	X		X			
Hoonah	City of Hoonah.	X		X			
Hydaburg	City of Hydaburg.	X		X			
Ivanof Bay	Ivanof Bay Village Council.		X				2
Kake	City of Kake.	X		X			
Karluk	Native Village of Karluk.		X		X	2	
Kasaan	City of Kasaan.	X		X			
King Cove	City of King Cove.		X				9
Klawock	City of Klawock.	X		X			
Larsen Bay	City of Larsen Bay.		X		X	2	
Metlakatla	Metlakatla Indian Village.	X		X			
Meyers Chuck	N/A.	X		X			
Nanwalek	Nanwalek IRA Council.		X		X	2	
Naukati Bay	Naukati Bay, Inc.	X		X			
Old Harbor	City of Old Harbor.		X		X	5	
Ouzinkie	City of Ouzinkie.		X		X	9	
Pelican	City of Pelican.	X		X			
Perryville	Native Village of Perryville.		X				2
Point Baker	Point Baker Community.	X		X			
Port Alexander	City of Port Alexander.	X		X			
Port Graham	Port Graham Village Council.		X		X	2	
Port Lions	City of Port Lions.		X		X	6	
Port Protection	Port Protection Community Association.	X		X			
Sand Point	City of Sand Point.		X				14
Seldovia	City of Seldovia.		X		X	8	
Tatitlek	Native Village of		X		X	2	

Eligible GOA community	Community governing body that recommends the CQE	May use halibut QS only in halibut IFQ regulatory		May participate in the Charter Halibut Limited Access Program		Maximum number of Pacific cod endorsed non-trawl groundfish licenses that may be granted	
		Area 2C, 3A	Area 3A, 3B	Area 2C	Area 3A	Central GOA	Western GOA
	Tatitlek.						
Tenakee Springs	City of Tenakee Springs.	X		X			
Thorne Bay	City of Thorne Bay.	X		X			
Tyonek	Native Village of Tyonek.		X		X	2	
Whale Pass	Whale Pass Community Association.	X		X			
Yakutat	City of Yakutat.		X		X	3	

a. Application for a Non-profit Corporation to be Designated as a Community Quota Entity (CQE) – [moved from OMB Control No. 0648-0272, and 14 respondents removed]

A community quota entity (CQE) is a non-profit organization that (1) did not exist prior to April 10, 2002; (2) represents at least one eligible community that is listed in Table 21 of this part; and (3) has been approved by the Regional Administrator to obtain by transfer and hold QS, and to lease IFQ resulting from the QS on behalf of an eligible community

NMFS requires information to establish the eligibility of the CQEs to hold QS, monitor the participation of the eligible communities in this program, gather information on the distribution of QS and IFQ among these communities, and receive an annual report from each CQE. This information is used both to evaluate the ability of the specific CQE to represent an eligible GOA community and to augment fisheries management efforts.

This application procedure is required for each non-profit entity seeking to become a CQE representing a specific community. This application is due only once, unless a particular eligible community withdraws support from a specific CQE. For purposes of estimating burden hours, this situation is unlikely to arise. The application would not be resubmitted more than once every five years.

An application may be submitted to NMFS by mail or delivery. Fax submittal is not acceptable due to the Notary requirements.

Application for a Non-profit Corporation to be Designated as a CQE

Block A—Identification of applicant

- Name of nonprofit organization
- Name of contact person
- Permanent business mailing address
- Business telephone number, fax number, and e-mail address
- Name of community represented by nonprofit organization
- Name of contact person for community governing body

Block B – Required Information -- Checklist of required attachments

Block C – Notary Certification

Printed name and signature of applicant and date signed
Signature, date when commission expires, and stamp of Notary

One CQE can represent more than one community, although a community can only have one CQE. A current list of CQEs and the communities represented is presented at <http://alaskafisheries.noaa.gov/ram/daily/cqenamescontacts-en-us.pdf>. These CQEs represent 28 communities. The potential number of additional respondents seeking to become a CQE is 7.

Application to Become an CQE, Respondent	
Estimated number of respondents	7
Total annual responses	7
Number of responses = 1 initial	
Total Time burden	1,400 hr
Time per response = 200 hr	
Total personnel cost (\$150 x 1400)	\$210,000
Total miscellaneous cost (55.65)	\$56
Postage (0.45 x 7 = 3.15)	
Photocopy (0.05 x 50pp x 7 = 17.50)	
Notary (5 x 7 = 35)	

Application to Become an CQE, Federal Government	
Total annual responses	7
Total Time burden	28 hr
Time per response = 4 hr	
Total personnel cost (\$25 x 28)	\$700
Total miscellaneous cost	0

b. Application for Transfer of QS/IFQ to or from a CQE [moved from OMB Control No. 0648-0272, and no respondents/responses added]

To participate in a fishery, an eligible community must first form a CQE and purchase catcher vessel QS through a transfer. The eligible communities and the community governing body that recommends the CQE are listed in Table 21 to 50 CFR Part 679. Once QS is held the CQE can lease the annual IFQ resulting from the QS to individual community residents.

The CQE Program was intended as a way to promote QS ownership by individual residents, as individuals can lease annual IFQ from the CQE and gradually be in a position to purchase their own QS. Both the community and individually-held QS are important in terms of fishing access and economic health of communities.

This application is used to apply for a transfer of QS or IFQ to or from a CQE. The receiving party of the QS/IFQ transfer must hold a Transfer Eligibility Certificate (TEC) (see OMB 0648-0272). If the application is to permanently transfer QS from a CQE to another party, the application must be signed by a representative of the community for whom the CQE holds the QS.

A. CQE may transfer QS to:

- ◆ Generate revenues to provide funds to meet administrative costs for managing the community QS holdings
- ◆ Generate revenue to improve the ability of residents within the community to participate in the halibut and sablefish IFQ fisheries
- ◆ Generate revenue to purchase QS to yield IFQ for use by community residents
- ◆ Dissolve the CQE

In addition, a CQE may transfer QS as a result of a court order, operation of law, or as part of a security agreement.

An application for transfer may be submitted to NMFS by mail or delivery. Fax submittal is not acceptable due to the Notary requirements.

Application for Transfer of QS/IFQ to or from a CQE

Block A – Identification of Transferor

- Name and NMFS Person ID
- Name of community represented by the CQE
- Business mailing address (indicate whether permanent or temporary)
- Business telephone number, business fax number, and business e-mail address

Block B – Identification of Transferee

- Name and NMFS Person ID
- Name of community represented by the CQE
- Business mailing address (indicate whether permanent or temporary)
- Business telephone number, business fax number, and e-mail address

Block C – QS Questions for Transferee

- If QS is to be included in a sweep-up, list the identifier on the QS certificate into which this new piece should be combined
- For sweep-up, **attach** the original QS Certificates of both the transferor and the transferee
- If this is a transfer of Catcher vessel CDQ compensation QS and the vessel category has never been declared, designate the catcher vessel category in which QS should be issued

Block D – Identification of QS/IFQ to be Transferred

Complete Block D if QS and IFQ transfer together or to transfer QS only
Quota Share to be transferred

- Total QS units
- Designation of QS, as shown on the QS certificate: from and to
- Indicate whether all remaining IFQ pounds from the current fishing year should be transferred with the QS
- If NO**, indicate the number of pounds to be transferred

Block E – Transfer of IFQ only (lease of IFQ)

- (Pertains only to proposed transfers from CQEs to qualifying community members)
- Identification of IFQ to be transferred: Permit number and year
- Name of the community to which QS are currently assigned

Block F – Required Transferor Supplemental Information

- Indicate the reason(s) transfer being proposed
- Price per unit of QS and the price per pound of IFQ
- Total amount paid for the QS/IFQ in this transactions, including all fees
- If a broker is used for this transaction, indicate amount paid in brokerage fees or percentage of total price
- Indicate reason for transferring QS/IFQ

Block G – Required Transferee Supplemental Information

- If QS/IFQ will have a lien attached, identify the lien holder
- Primary source of financing for this transfer
- How was the QS/IFQ located
- Relationship to the transferor
- If an agreement exists to return the QS or IFQ to the transferor or any other person or a condition placed on resale, explain

Block H -- Certification of Transferor

- Printed name and signature of Transferor and date signed
- If authorized representative, **attach** authorization
- Signature, commission expiration date, and stamp of notary

Block I -- Certification of Transferee

- Printed name and signature of Transferee and date signed.
- If authorized representative, attach authorization.
- Signature, commission expiration date, and stamp of notary

Block J -- Certification of CQE Community Representative

- Printed name, title, and signature of Community Representative and date signed
- Signature, commission expiration date, and stamp of notary

Two CQEs have Halibut QS, and they do several transfers a year; they lease out the annual IFQ to community residents. Transfers of Charter halibut permits or LLP permits are not allowed in the CQE program. The number of potential transfers to or from a CQE is left at 21.

Application for Transfer of QS/IFQ to or from a CQE, Respondent	
Estimated number of respondents	21
Total annual responses	42
Number of responses per year = 2	
Total Time burden	84 hr
Time per response = 2 hr	
Total personnel cost (\$25 x 84)	\$2,100
Total miscellaneous cost (237.30)	\$237
Postage (.45 x 421 = 18.90)	
Photocopy (0.05 x 4 pp x 42 = 8.40)	
Notary (\$5 x 42 = 210)	

Application for Transfer of QS/IFQ to or from a CQE, Federal Government	
Total annual responses	42
Total Time burden	21 hr
Time per response = 30 min	
Total personnel cost (\$25 x 21)	\$525
Total miscellaneous cost	0

**c. Application for a CQE to Receive a Non-trawl Groundfish LLP License
[moved from OMB Control No. 0648-0334, and no respondents/responses added]**

Entities representing specific communities may receive a limited number of fixed gear LLP licenses with Pacific cod endorsements for use on vessels designated by entities representing the communities. This is expected to:

- ◆ Provide greater economic stability for fixed gear LLP license holders with recent participation in the Central GOA and Western GOA Pacific cod fisheries.

- ◆ Reduce the potential for substantial increases in fishing effort from latent LLP license holders.
- ◆ Provide additional harvesting opportunities for residents of specific communities (see table below) located adjacent to the Western and Central GOA, including the West Yakutat District through Non-profit CQEs who hold fixed gear LLP licenses

A groundfish license approved for issuance to a CQE by the Regional Administrator for an eligible community:

- May not be transferred to any person;
- May not be assigned to any vessel other than the vessel specified for that groundfish license in the annual CQE authorization letter; and
- May not be assigned for use by any person other than the person specified for that groundfish license in the annual CQE authorization letter, or any subsequent amendment to that annual authorization letter that is made by the CQE provided that NMFS receives that amendment prior to that person using that groundfish license aboard a vessel.
- Will have only the regional designation specified for that community.
- Will have a maximum length overall (MLOA) of 60 feet specified on the license.
- Will have only a catcher vessel designation;
- Will receive only a non-trawl gear endorsement;
- Will be assigned a Pacific cod endorsement with a non-trawl gear designation.

Non-trawl Pacific cod gear endorsements on groundfish licenses approved for issuance to CQEs shall have the following gear designations:

- Only pot gear Pacific cod endorsements for groundfish licenses with a Western GOA designation to CQEs on behalf of an eligible community.
- Either a pot gear or a hook-and-line gear Pacific cod endorsement for a groundfish license with a Central GOA designation to CQEs on behalf of an eligible community.

There are 45 communities eligible under the CQE Program, located in the Western and Central GOA management areas, including West Yakutat. Under the Federal LLP, the Central GOA endorsement area also authorizes vessels to fish in the West Yakutat management area, and communities located in this area are also included in this discussion.

The CQEs, representing specific communities in the Central GOA and Western GOA, would need to submit:

- ◆ An application to receive a fixed gear LLP license endorsed for Pacific cod, the selection of fixed gear type by CQEs in the Central Gulf (CG), a description of the methods used to assign any fixed gear LLP licenses received,
- ◆ A letter of authorization for persons using LLP licenses assigned to a CQE, and
- ◆ An annual report detailing the distribution and use of LLP licenses.

A CQE may apply for and may receive a maximum amount of groundfish licenses designated in the regulatory area specified for a community. Licenses would have an MLOA designation of 60 ft. Western GOA licenses would be endorsed for pot gear, and Central GOA CQEs may choose either a pot or hook-and-line endorsement.

Each CQE that is approved by the Regional Administrator may apply to receive groundfish licenses on behalf of the communities that the CQE is designated to represent. To receive a groundfish license a CQE must submit a complete application for a groundfish license to the Regional Administrator, NMFS, P.O. Box 21668, Juneau, AK 99802. The application may be submitted by mail, courier, or fax.

A maximum of 50 Central GOA and 21 Western GOA licenses would be issued.

Application for a CQE to receive a Non-trawl groundfish LLP license

Identification

Name of non-profit organization

Name of contact person for the CQE

NMFS person ID number

Permanent business mailing address

Business telephone number, business e-mail address, and business fax number

Procedures to determine the distribution of LLP licenses to community residents represented by that CQE

Procedures used to solicit requests from residents to be assigned an LLP license

Criteria to determine the distribution of the use of LLP licenses among qualified community residents and the relative weighting of those criteria

Number of LLP licenses the CQE is requesting and the gear designation for each license

Application for a CQE to receive a Non-trawl groundfish LLP license, Respondent	
Total respondents	8
Total responses = 1	8
Frequency of response = Initial application	
Total burden hours	160 hr
Time per response = 20 hr	
Total personnel cost (\$25 x 160)	\$4,000
Total miscellaneous costs (7.60)	\$8
Postage (0.45 x 8 = 3.60)	
Copying (0.05 x 10 pp x 8 = 4.00)	

Application for a CQE to receive a Non-trawl groundfish LLP license, Federal Government	
Total responses	8
Total burden hours	32 hr
Time per response = 4 hr	
Total personnel costs (\$25 x 32)	\$800
Total miscellaneous costs	0

d. Community Quota Entity (CQE) Annual Report [moved from OMB Control No. 0648-0334, and no respondents/responses added]

This action proposes the consolidation of CQE annual reporting requirements for all CQE participation in Federal fishery management programs described in § 679.5(t). This section would describe both general reporting requirements for CQE annual reports and specific reporting requirements for any CQE participating in the IFQ, charter halibut limited access, and LLP programs. The action would also revise § 679.4(k), Permits, and § 679.5(l), Recordkeeping and Reporting, to reference the single location for annual reporting regulations at § 679.5(t). Finally, the action would add the CQE annual reporting requirement to the charter halibut limited access program at § 300.67(k)(7). These proposed changes would streamline regulatory text and provide CQEs with a single reference to determine their annual reporting requirements.

The CQE may combine annual reports about its holdings. A CQE must submit annual report data for the community charter halibut permit, IFQ, and LLP permits it held during the calendar year. A CQE is not required to submit an annual report for any calendar year in which it did not hold any community charter halibut permits, IFQ, or LLPs.

By January 31, the CQE must submit a complete annual report for the prior calendar year to the Regional Administrator, NMFS, P.O. Box 21668, Juneau, AK 99802, and to the governing body of each community represented by the CQE as identified in Table 21 to part 679.

A complete annual report must contain all general report requirements and all program specific report requirements applicable to the CQE, as follows:

Community Entity Quota (CQE) Program Annual Report

General report requirements:

Each CQE must report business operations and fishing activity for the charter halibut permit, IFQ, and LLP programs for each eligible community represented by the CQE and must provide

Name of eligible community or communities

Any new communities

Any withdrawn communities

Any changes in the bylaws of the CQE, board of directors, or other key management personnel; and

Attach copies of minutes and other relevant decision making documents from all CQE board meetings held during the prior calendar year

Charter Halibut Permit (CHP) Limited Access Program

For each community issued one or more CHPs by a CQE, the program-specific report must include:

Total number of CHPs held by the CQE

At the start of the calendar year

At the end of the calendar year

Projected to be held in the next calendar year

Process used by the CQE to solicit applications from persons to use CHPs

Total number of persons who applied to use one or more CHPs

Name

Business address, city and state

Number of CHPs requested by each person

Criteria used by the CQE to distribute CHPs among persons who applied to use one or more CHPs

For each person issued one or more CHPs, provide

Name

Business address, city and state,

ADF&G logbook number(s)

Number(s) of each CHP authorized to use with the corresponding regulatory area endorsement and angler endorsement

For each vessel authorized to participate in the charter halibut fishery using one or more CHPs, provide

Vessel name

ADF&G vessel registration number

USCG documentation number

Length overall

Home port

Each CHP number held by the CQE and used onboard the vessel

Each set of ports from which the vessel departed and to which it returned

Total number of trips that occurred to and from each set of ports

For each community represented by the CQE, provide any payments made to the CQE for use of the CHPs.

Individual Fishing Quota Program Specific Report

For each community that leased halibut and sablefish IFQ derived from the QS held by a CQE, the program specific report must include:

Total amount of halibut QS and total amount of sablefish QS held by the CQE

at the start of the calendar year

at the end of the calendar year

projected to be held in the next calendar year

Describe process used by the CQE to solicit applications from eligible community residents to use IFQ

Total number of community residents who applied to use IFQ derived from QS held by the CQE;

For each person who applied to use IFQ, provide

Name

Business address, city and state

Amount of IFQ requested

Describe criteria used by the CQE to distribute IFQ among eligible community residents who applied to use IFQ

For each person who leased IFQ derived from QS held by the CQE, provide

Name

Business address, city and state

Each IFQ permit number

Total pounds of halibut IFQ authorized to use through each IFQ permit number

Total pounds of sablefish IFQ authorized to use through each IFQ permit number;

For each vessel used to harvest IFQ derived from QS, provide

Vessel name

ADF&G vessel registration number

USCG documentation number

Length overall

Home port

Each IFQ permit number(s) used onboard

Describe efforts made by the CQE to ensure crew members onboard the vessels used to harvest the IFQ are residents of the CQE eligible community

For each person employed as a crew member, provide

Name

Resident city and state

For each community whose residents landed IFQ, provide any payments made to the CQE for use of the IFQ

License Limitation Program Specific Report

For each community that was assigned one or more Pacific cod endorsed non-trawl groundfish licenses, the program specific report must include:

Total number of LLP groundfish licenses by gear type endorsement held by the CQE

At the start of the calendar year

At the end of the calendar year

Projected to be held in the next calendar year

Describe process used by the CQE to solicit applications from residents to use LLP groundfish license(s)

Total number of community residents who applied to use an LLP groundfish license

Name

Business address, city and state

Number of LLP groundfish licenses requested by each person who applied to use a LLP groundfish license

Describe criteria used by the CQE to distribute LLP groundfish licenses among eligible community residents

For each person assigned one or more LLP groundfish licenses, provide

name, business address, city and state

LLP groundfish license numbers for each gear endorsement type

For each vessel authorized to harvest LLP groundfish using one or more LLP groundfish licenses, provide:

Vessel name

ADF&G vessel registration number

USCG documentation number

Length overall

Home port

Each LLP groundfish license number used onboard

For each person employed as a crew member on each vessel using one or more LLP groundfish licenses

Name

Resident city and state

For each community whose residents made landings using one or more LLP groundfish licenses, provide any payments made to the CQE for use of the LLP groundfish licenses.

CQE Annual Report, Respondent	
Estimated number of respondents	24
Total annual responses	24
Response per respondent = 1	
Total burden hours	960 hr
Time per response = 40 hr	
Total personnel cost = \$25/hr	\$24,000
Total miscellaneous costs (22.80)	\$23
Photocopy (10 pp x .05 x 24 = 12)	
Postage (0.45 x 24 = 10.80)	

CQE Annual Report, Federal Government	
Total annual responses	24
Total burden hours = 4 hr	96 hr
Total personnel cost = \$25/hr	\$2,400
Total miscellaneous cost	0

e. CQE LLP Authorization letter [moved from OMB Control No. 0648-0334, and no respondents/responses added]

The LLP is issued to the CQE and the CQE designates the vessel to which the LLP license is assigned. Prior to requesting an LLP, the CQE shall provide NMFS with a detailed plan for soliciting and determining recipients of the CQE permit.

Upon receipt of the LLPs from NMFS, the CQE shall determine who may use the LLP license and provide them with a letter of authorization. The LLP license issued cannot designate more than one vessel per LLP per calendar year. The CQE must provide an authorization letter assigning each community LLP to a specific vessel and designating the vessel operator. The person specified for an LLP groundfish license in an annual CQE authorization letter must be on board the vessel during directed fishing. The CQE must send a copy of each letter to NMFS, and must maintain a copy.

The authorization letter must be sent to the authorized vessel, and the copy of that letter must be maintained onboard the vessel. This would help to ensure that only those persons and vessels that have been vetted through the CQE would be able to use the LLP license.

If an amendment is made to the annual CQE authorization letter, copies of the revised CQE authorization letter must be sent to the designated vessels.

As part of the authorization letter, NMFS requires that the CQE attest that the authorized representative using a groundfish license issued to a CQE:

- ◆ Is a citizen of the United States;
- ◆ Has maintained a domicile in a CQE community in the Central GOA or Western GOA eligible to receive an LLP license endorsed for Pacific cod for the 12 consecutive months immediately preceding the time when the assertion of residence is made; and
- ◆ Is not claiming residency in another community, state, territory, or country, except that residents of the Village of Seldovia shall be considered to be eligible community residents of the City of Seldovia for the purposes of eligibility to serve as an authorized vessel operator.

The residency requirements for a vessel operator using a CQE license ensures that residents of a specific community actively participate in the Pacific cod fishery consistent with the overall goal the Council established for CQE LLP licenses.

The authorization letter would require that the CQE attest to individuals' residency, but would not require individuals to submit proof of residency to NMFS in order to use the LLP license issued to the CQE. This approach would reduce potential administrative burdens on NMFS that could be required to determine the residency of a specific person. In many cases, particularly in smaller communities, the representatives of CQEs are likely to have specific local knowledge that can be used to assess a person's claim of residency in a particular community.

CQE Letter of authorization, Respondent	
Total respondents	24
Total responses = 1	24
Frequency of response = 1	
Total burden hours	24 hr
Time per response = 1 hr	
Total personnel cost (\$25 x 24)	\$600
Total miscellaneous costs (11.76)	\$12
Postage (0.44 x 24 = 10.56)	
Photocopy (0.05 x 1 pp x 24 = 1.20)	

CQE Letter of authorization, Federal Government	
Total responses	24
Total burden hours = 1 hr	24
Total personnel costs (\$25/hr)	\$600
Total miscellaneous costs	0

f. Application for Community Charter Halibut Permit (CCHP) [moved from OMB Control No. 0648-0592, and no respondents/responses added]

This special type of special charter halibut permit is available in order to allow economic development of a charter halibut fishery in certain rural communities.

Community charter halibut permit.

A CQE could apply for a limited number of permits for eligible communities at no cost, if they meet criteria for limited participation in the charter halibut fishery. The purpose of issuing permits to this subset of small GOA communities, not located on the road system, is to provide them the opportunity to derive economic benefits from the charter halibut industry.

A CQE representing a community or communities in Area 2C could receive a maximum of four Community Charter Halibut Permits for each eligible community it represents. A CQE representing a community or communities in Area 3A could receive a maximum of seven Community Charter Halibut Permits for each eligible community it represents. The larger number of community permits that would be allowed in Area 3A reflects the larger resource base in that area. A Community Charter Halibut Permit would have an angler endorsement of six. The communities eligible for community charter halibut permits include those CQE communities in which 10 or fewer “active” charter vessel businesses terminated charter vessel trips in the community in each of the qualifying years, 2004 and 2005.

The list of communities eligible for community charter halibut permits under a CQE are a subset of those listed in Table 21 in 50 CFR part 679, shown previously. In addition to the community charter halibut permits available to a CQE under this proposed action, a CQE could acquire other charter halibut permits through transfer.

A charter vessel fishing trip for halibut that is authorized by a Community Charter Halibut Permit would be required to either begin or end within the geographic boundaries of the community designated on the permit. The purpose of this requirement is to assure that the charter vessel anglers on such a fishing trip have an opportunity to use the goods and services of the community. A Community Charter Halibut Permit issued to a CQE could not be transferred to a different CQE or to a non-CQE entity.

Applications submitted by mail, hand deliver, or fax would be acceptable if postmarked or hand delivered or faxed no later than the last day of the application period. Electronic submissions other than fax would not be acceptable because each application would require the original signature of the applicant.

Application for Community Charter Halibut Permit (CCHP)

Block A--Type of permit

Indicate type of permit for which applying.

If applying for Community Charter Permit,

An authorized CQE must apply on behalf of the eligible community
 Complete Blocks A and B.
 Sign and date Block D
 Enter the name of the community to be represented

Block B –Applicant information

Applicant’s name
 Business mailing address (street or P.O. Box, city, state, zip code)
 Business telephone number, business fax number, and business e-mail address

Block C – Community Charter Halibut Permit(s) request

Name(s) of the community that the CQE represents
 For each community charter permit requested, specify
 Name(s) of person(s)
 Number of permits to be issued to that person
 List location boundaries of community, including latitude and longitude, where all trips will begin or end

Block E – CQE applicant signature

Signature, printed name, and title of individual completing this application on behalf of CQE
 Date signed. **Attach** authorizing documentation.

Application for community charter Permit, Respondents	
Total number of respondents	32
Communities: 14 – Area 3A 18 – Area 2C	
Total annual responses	
Frequency of response = 1	32
Total annual time burden	
Estimated response time = 1 hr	32
Total personnel costs	
Cost per hour = \$25	\$800
Total miscellaneous costs (109.60)	
Mail (0.45 x 16 = 7.20)	\$110
Fax (6 x 16 = 96)	
Photocopy (2 x 0.10 x 32 = 6.40)	

Application for community charter Permit, Federal Government	
Total responses	32
Frequency per response = 1	
Total annual time burden	16
Estimated response time = 0.5	
Total personnel costs	400
Cost per hour = \$25	
Total miscellaneous costs	0

**g. Application for Transfer Between IFQ and GAF by a Community Quota Entity (CQE)
 [moved from OMB Control No. 0648-0592, and no respondents/responses added]**

The Application for Transfer Between IFQ and GAF by a Community Quota Entity (CQE) is used to transfer annual IPHC Area 2C or 3A commercial IFQ held by a CQE for use as GAF by a community resident holding one or more CHPs for areas 2C or 3A. In addition, this application may be used to return unused GAF to the CQE from which it was obtained.

- ◆ A CQE applying for a transfer between IFQ and GAF must be eligible to hold IFQ on behalf of an eligible community in Area 2C or Area 3A and have received NMFS' notification of approval of eligibility to receive IFQ for that community. In addition,
- ◆ An individual applying to receive GAF from Area 2C or Area 3A IFQ held by a CQE must be an eligible community resident of the eligible community in whose name the CQE is holding IFQ.
- ◆ The CQE applying to receive GAF must hold one or more valid community CHPs.
- ◆ The CQE applying to transfer IFQ to GAF must submit a complete annual report(s) as required by 50 CFR part 679.5(1)(8).

NMFS will not transfer IFQ to GAF after November 1 and will return all unharvested GAF to the CQE on or about November 1 each year.

The CQE is responsible for all cost recovery fees (OMB Control No. 0648-0398) resulting from the GAF harvested as a result of this transfer. Unused GAF will be returned to the CQE from which they were obtained; no fees will be assessed for any unused GAF.

Applications may be submitted to NMFS by mail or by delivery.

Application for Transfer Between IFQ and GAF by a CQE

Attachments

- Completed Application
- Copy of IFQ permit (s)
- Valid Charter Halibut Permit
- Power of Attorney (if applicable)

Identification of proposed transferor

- Name and NMFS Person ID of Transferor
- Name of Community represented by the CQE
- Permanent Business Mailing Address and Temporary Business Mailing Address
- Business Telephone No. and Business Fax No
- Business E-mail address (if available)

Identification of proposed transferee

- Name and NMFS Person ID of Transferee
- Name of Community represented by the CQE
- Permanent Business Mailing Address and Temporary Business Mailing Address
- Business Telephone No. and Business Fax No
- Business E-mail address (if available)

Identification of IFQ and/or GAF To be Transferred

- IFQ Permit Number
- IPHC Area
- Charter Halibut Permit Number
- GAF Permit Number (only required when GAF is returning to the IFQ permit holder)
- Number of GAF

Notarized certification of proposed transferor

- Signature and printed name of transferor and date signed
- If a representative, **attach** authorization
- Signature of notary public, date commission expires, and notary stamp or seal

Notarized Certification of proposed transferee

- Signature and printed name of transferee and date signed

If a representative, **attach** authorization
 Signature of notary public, date commission expires, and notary stamp or seal

Eighteen Area 2C communities are eligible to each receive up to 4 halibut charter halibut permits at no cost; 14 Area 3A communities are eligible to each receive up to 7 halibut charter halibut permits at no cost. Note that eligibility for community charter halibut permits is conditioned on the fact that the community must be represented by a non-profit community quota entity approved by NMFS. Thus, the number of eligible community entities that would be authorized to engage in GAF transfers is a maximum estimate.

Application for Transfer Between IFQ and GAF by CQE, Respondent	
Number of respondents	32
18 Area 2C	
14 Area 3A	
Total annualized responses	32
Frequency of response = 1	
Total burden hours	
Time per response = 2 hr	64 hr
Total personnel costs (\$25 x 64)	\$1,600
Total miscellaneous costs (91.60)	\$92
Mail (1.32 x 30 = 39.60)	
Fax (6 x 2 = 12)	
Photocopy (.05 x 25pp x 32 = 40)	

Application for Transfer Between IFQ and GAF by CQE, Federal Government	
Number of responses	32
Total burden hours	16
Time per response = 30 min	
Total personnel costs (\$25 x	\$400
Total miscellaneous costs	0

It is anticipated that the information collected will be disseminated to the public or used to support publicly disseminated information. 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 Question 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.

Forms and applications are “fillable” on the computer screen at the NMFS Alaska Region Home Page at www.alaskafisheries.noaa.gov. The Application for a CQE to Receive a Non-trawl LLP License and the Application for Transfer of QS-IFQ to a CQE may be submitted to NMFS by

mail, courier, or fax. The Application for a Non-profit Corporation to be Designated as a CQE and the Application for Transfer of QS-IFQ to a CQE may be submitted to NMFS by mail or delivery. Fax submittal is not acceptable due to the Notary requirements. The CQE final report is a large report with various sizes of pages which must be submitted by mail or in person. The CQE Authorization Letter may be submitted as an attachment to an email.

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.

NMFS has defined all IFQ halibut vessels as small businesses, for the purpose of this analysis. This 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.

Without the specified reporting scheme described in this Support Statement, the CQE Program would be unable to proceed.

The lack of adequate information to manage the CQE Program would result in the fishery management decision-making process being less objective, more political, and potentially less equitable. This would decrease the credibility of the fishery management process and result in an unnecessarily costly and ineffective management system. The cost of making decisions based on inadequate information would adversely affect the viability of the CQE fishing industry.

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

No special circumstances exist.

8. Provide information on 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.

NMFS Alaska Region published a proposed rule (RIN 0648-BB94) coincident with this submission, requesting comments from the public.

Three comments were received. The first commenter was in favor of the rule because it will promote better monitoring and reporting of harvests. The second commenter requested removal of one of the information collection requirements, and NMFS explained why there would be no change. The third comment letter was received from a representative of the affected fishing industry that supported actions 1 through 3 as proposed. The commenter suggested three modifications to the proposed regulations under action 4 for CQE annual reporting. A summary of these three unique comments and NMFS' responses follow. There was no change in response to the second comment (see response summary below and complete summary in the draft FR), and the three changes described below were in response to Comments 3 and 4.

Comment 1

I support this rule because it will improve NOAA's ability to monitor harvests. This will benefit fish stocks in Alaska.

Comment 2

The proposed rule would require CQEs to provide each set of ports from which a vessel using a charter halibut held by the CQE departed and to which it returned, and the total number of trips to occur to and from each set of ports. This requirement is burdensome on CQEs because the information would need to be collected at the end of the fishing season when it is difficult to interface with the CQE permit holder. Moreover, this information is already compiled in the charter operator's logbook.

Comment 3

We suggest removing the proposed requirement for CQEs to report the business address of each person employed as a crew member on each vessel used to harvest IFQ derived from QS held by the CQE. Since the CQE Program was implemented, it has proven difficult to obtain address information for IFQ crew members after the fishing season is completed. Generally a crew member's name and residency may be the only information a CQE can obtain. We believe the CQE should only be required to provide the name and residency of crew members employed on each vessel used to harvest IFQ derived from QS held by the CQE.

Comment 4 (same commenter as for Comment 3)

We suggest removing the annual report requirement for a description of the efforts by the CQE to ensure crew members onboard the vessels authorized to harvest LLP groundfish using one or more LLP groundfish licenses held by the CQE are residents of the eligible community. A report on these efforts is outside the scope of the Council's intent when granting a LLP groundfish license to a CQE community because no requirement exists to ensure that crew members onboard the vessel authorized to harvest LLP groundfish were community residents.

Response to Comments

- ◆ NMFS acknowledged the comment.
- ◆ NMFS responded to the second comment that this information is not available elsewhere in this detail and that because requiring such information is a condition of the CQE permit, it should not be difficult to obtain from the CQEs. The proposed reporting requirement is consistent with the goals of the charter halibut limited access program

and is necessary for the Council to review and evaluate the use of charter halibut permits held by CQEs.

- ◆ NMFS changed the proposed regulations for the IFQ program reporting requirements at § 679.5(t)(5)(v)(I) to remove the proposed requirement for a CQE to report the business address of each person employed as a crew member on a vessel used to harvest IFQ derived from QS held by the CQE.
- ◆ NMFS changed the proposed regulations for the LLP program reporting requirements at § 679.5(t)(5)(vi)(H) to remove the proposed requirement for a CQE to describe its efforts to ensure crew members onboard a vessel authorized to harvest LLP groundfish using one or more LLP groundfish licenses held by the CQE are residents of the eligible community.
- ◆ NMFS changed the proposed regulations at § 679.5(t)(5)(vi)(I) to remove the proposed requirement for a CQE to report the business address of each person employed as a crew member on a vessel authorized to harvest LLP groundfish using one or more LLP groundfish licenses held by the CQE.

These changes to the regulations are reflected in the information collection for the CQE annual report, in Question 2. There is no associated burden or cost change.

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

No payment or gift is 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 402(b) 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. Assurance of confidentiality under these authorities is stated on all forms.

A Privacy Act System of Records Notice (SORN), COMMERCE/NOAA System-19, Permits and Registrations for United States Federally Regulated Fisheries, was published in the *Federal Register* on April 17, 2008 (73 FR 20914). An updated SORN is under DOC review.

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 respondents: 64 (24 CQEs, 32 Community halibut permittees, 8 CQEs to receive non-trawl LLP). Estimated total responses: 169. Estimated total burden: 2,724 hr. Estimated total personnel costs: \$241,500.

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 Question 12 above).

Estimated total miscellaneous costs: \$538.

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

Estimated total responses: 169. Estimated total burden: 233 hr. Estimated total personnel costs: \$5,125.

15. Explain the reasons for any program changes or adjustments.

Program Change: This is a new collection-of-information created by combining and revising three existing portions of the CQE Program that were previously in three different collections-of-information. Also, an adjustment is made to correct the number of eligible communities; the current correct number of communities is 42. Adding three new communities to the CQE Program makes 45 in total.

Application for a Non-profit Corporation to be Designated as a CQE [transferred from 0272 with changes]: a decrease of 14 respondents, 7 instead of 21; a decrease of \$6 miscellaneous costs, \$56 instead of \$62.

The remaining information collections were transferred from the original collections with no changes:

Application for Transfer of QS/IFQ to or from a CQE [transferred from 0272 with no change]: 21 respondents, 42 responses, 84 hours, \$2,100 personnel costs, \$237 instead of \$119 miscellaneous costs.

Application for Community Charter Permit [transferred from 0592 with no change]: 32 respondents and responses, 32 hours, \$800 personnel costs, \$110 miscellaneous costs.

Application for a CQE to receive a Non-trawl Groundfish LLP license [transferred from 0334 with no change]: 8 respondents and responses, 160 hours, \$4,000 personnel costs, \$8 miscellaneous costs.

Application for Transfer between IFQ & GAF by CQE – [transferred from 0592 with no change] – 32 respondents and responses, 64 hours, \$1,600 personnel costs, \$92 miscellaneous costs.

CQE Letter of authorization – [transferred from 0334 with no change] 24 respondents and responses, 24 hours, \$600 personnel costs, \$12 miscellaneous costs.

CQE Annual Report [moved from 0334 with no change] -- 24 respondents and responses, 960 hours, \$ 24,000 personnel costs, \$ 23 miscellaneous costs.

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

NMFS Alaska Region posts LLP license information on the web at <http://alaskafisheries.noaa.gov/ram/llp.htm#list>. The lists contain LLP groundfish and crab licenses issued as of the indicated preparation date. Data are sorted alphabetically and are updated daily. Under current regulations, vessels must be designated on the licenses and the identities of original qualifying vessels are provided for reference only.

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.

Not Applicable.

18. Explain each exception to the certification statement.

Not Applicable.

B. COLLECTIONS OF INFORMATION EMPLOYING STATISTICAL METHODS

This collection does not employ statistical methods.



**Application
for a Non-profit Corporation
to be Designated as a
Community Quota Entity (CQE)**

U.S. Dept. of Commerce/NOAA
National Marine Fisheries Service (NMFS)
Restricted Access Management Program (RAM)
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 APPLICANT

1. Name of Non-Profit Organization:		2. Name of Contact Person:	
3. Permanent Business Mailing Address:			
4. Business Telephone Number:	5. Business Fax Number:	6. E-mail address (if available):	
7. Name of Community Represented by Non-Profit:		8. Name of Contact Person for Community Governing Body:	

BLOCK B - REQUIRED ATTACHMENTS

Attach the following information to this application. The application will not be processed unless appropriate information and documentation is provided.

- The applicant's Articles of Incorporation
- The applicant's Corporate By-laws
- A list of the applicant's key personnel, including its Board of Directors and Officers
- The applicant's Organizational Chart or, at a minimum, a written explanation that fully reveals the applicant's line and staff responsibilities and relationships
- A statement designating the eligible Gulf of Alaska coastal community(ies) that the entity seeks to represent
- An explanation of how the applicant will manage QS/IFQ on behalf of the community(ies) it seeks to represent
- A statement that explains the procedures that will be used to solicit requests from community residents to use (lease) annual IFQ held by the applicant and that sets out the criteria and procedures to be used to select from among those who have expressed a desire to use the IFQ.
- Formal resolution from the community governing body (i.e., the city council if a municipality, the tribal governing body if not a municipality, or the non-profit community association if neither a municipality or a tribe) that unambiguously designates the applicant as the community's representative and CQE.

INSTRUCTIONS
**APPLICATION FOR A NON-PROFIT CORPORATION
TO BE DESIGNATED AS A
COMMUNITY QUOTA ENTITY (CQE)**

A non-profit organization that wishes to represent an eligible Gulf of Alaska (GOA) community in the acquisition and use of quota share (QS) and individual fishing quota (IFQ) must complete this application for approval. Only those non-profit organizations approved by NMFS will be eligible to purchase QS and/or transfer IFQ on behalf of an eligible GOA community.

Type or print legibly in ink and retain a copy of completed application for your records. **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.

An application may be submitted to NMFS by mail or delivery. Fax submittal is not acceptable due to the Notary requirements. RAM will not process an application that does not bear original signatures (faxed applications will be returned). All signatures must be witnessed by a Notary Public (or, in some remote areas, the community Postmaster or Postmistress).

When completed, submit application

by mail to: **NMFS Alaska Region
Restricted Access Management (RAM)
P.O. Box 21668
Juneau, Alaska 99802-1668**

or deliver to: **709 West 9th Street, Room 713
Juneau, AK 99801**

Items will be sent to you by first class mail, unless you provide alternate instructions and include a prepaid mailer with appropriate postage or corporate account number for express delivery. Additional information is available from RAM, as follows:

Website: <http://www.alaskafisheries.noaa.gov/ram/default.htm>

Telephone (toll free): 800-304-4846 (press "2")

Telephone (in Juneau): 907-586-7202 (press "2")

e-Mail: RAM.Alaska@noaa.gov

COMPLETING THE APPLICATION

BLOCK A - IDENTIFICATION OF APPLICANT

1. Provide the name of the non-profit entity seeking to become a CQE
2. Name of the contact person for the non-profit organization applying to become a CQE
3. Enter permanent business mailing address, including street or P.O. Box, city, state, and zip code
- 4-6. Business telephone number, business fax number, and business e-mail address (*if available*)

7. Enter the name of the eligible GOA community to be represented by the non-profit.
8. List the name of the contact person for Community Governing Body of the community.

BLOCK B - REQUIRED ATTACHMENTS

The non-profit organization applying to become a CQE must provide all of the documentation listed in this section. Failure to provide any of the required documentation will result in a denial of this application. This information is used both to evaluate the ability of the non-profit applicant to represent an Eligible GOA community and to ensure the non-profit has the support of the community's government body.

BLOCK C - NOTARY CERTIFICATION

- 1-3. Enter applicant printed name, signature, and date of application in the presence of a Notary Public. As a result of this requirement, **we cannot process faxed applications**. Representatives acting on behalf of an applicant must supply proof of agent authorization to submit this application on the applicant's behalf.
- 4-6. A Notary Public must Attest (sign), indicate date when commission expires, and affix his/her Notary Stamp. The Notary Public cannot be completed by the person submitting this application.



**Application
for a Community Quota Entity
(CQE) to Receive a Non-trawl
Groundfish LLP License**

U.S. Dept. of Commerce/NOAA
National Marine Fisheries Service (NMFS)
Restricted Access Management Program (RAM)
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 APPLICANT

1. Name of Non-Profit (CQE) Organization:	2. Name of CQE Contact Person:	3. CQE NMFS Person ID:
4. Name of Community on whose behalf the CQE is applying for an LLP(s):		
5. Permanent Business Mailing Address:		
6. Business Telephone Number:	7. Business Fax Number:	8. Business E-mail Address:

**BLOCK B – NUMBER OF GULF OF ALASKA NON-TRAWL LLP LICENSES &
NON-TRAWL GEAR DESIGNATIONS REQUESTED**

1. Enter the number of LLP groundfish licenses being requested (*see instructions for the maximum number of licenses that can be issued per eligible community, for a management area*)
2. In the space below enter the non-trawl gear type to be designated on each groundfish license requested. By regulation NMFS may issue only pot gear Pacific cod endorsements for licenses that are endorsed for the Western Gulf of Alaska (WG). (*see instructions*)

License	Gear Type	License	Gear Type
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

BLOCK C – ATTACHMENTS WITH ADDITIONAL INFORMATION

The following information must be included as attachments to this application. The application will not be processed unless appropriate information and documentation are provided.

- ◆ Describe the procedures the CQE will use to determine the distribution of LLP licenses to residents of the community represented by that CQE.
- ◆ Describe the procedures the CQE will use to solicit requests from residents to be assigned an LLP license.
- ◆ Describe the criteria the CQE will use to determine the distribution of LLP licenses among qualified community residents and the relative weighting of those criteria.
- ◆ The CQE must provide an annual CQE authorization letter to NMFS that lists for each LLP license held by the CQE:
 - o The vessel to be assigned to the license for the calendar year
 - o The individual authorized to use the LLP license
 - o Certifies that the individual authorized to use the LLP license is
 - A citizen of the United States
 - Has maintained a domicile, for the 12 consecutive months preceding the authorization in the CQE Community that is eligible to receive an LLP license endorsed for Pacific cod in the CG or WG and on whose behalf this LLP license is to be held.

BLOCK D - CQE CERTIFICATION

I am a duly authorized representative of the applicant; by my signature below, I declare that I have examined this application in its entirety, 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): If agent, attach authorization.

Instructions
Application for a Community Quota Entity (CQE) to
Receive a Non-trawl Groundfish LLP License

Each non-profit must be approved by NMFS as a CQE by submitting an Application for a Non-profit Corporation to be Designated as a Community Quota Entity (CQE) which is at: <http://alaskafisheries.noaa.gov/ram/cqp/CQEStatus.pdf>

Each CQE that is approved by the Regional Administrator under the requirements of 50 CFR 679.41(1)(3) to represent a community may apply to receive a groundfish license on behalf of any of the communities listed in Table 50 to part 679 (see below). A CQE may not apply for, and may not receive, more than the maximum amount of groundfish licenses designated in the regulatory area specified for a community listed.

**Table 50 To Part 679 — Maximum Number of Groundfish Licenses
and the Regulatory Area Specification of Groundfish Licenses
that May Be Granted to CQEs Representing Specific GOA Communities**

Central GOA Pacific cod endorsed non-trawl groundfish license		Western GOA Pacific cod endorsed non-trawl groundfish license	
Community	Max. number of groundfish licenses that may be granted	Community	Max. number of groundfish licenses that may be granted
Akhiok	2	Ivanof Bay	2
Chenega Bay	2	King Cove	9
Chignik	3	Perryville	2
Chignik Lagoon	4	Sand Point	14
Chignik Lake	2		
Halibut Cove	2		
Karluk	2		
Larsen Bay	2		
Nanwalek	2		
Old Harbor	5		
Ouzinkie	9		
Port Graham	2		
Port Lions	6		
Seldovia	8		
Tyonek	2		
Tatitlek	2		
Yakutat	3		

A groundfish license approved for issuance to a CQE by the Regional Administrator for a community:

- ◆ May not be transferred to any person from the CQE;
- ◆ Will have only the regional designation specified for that community as listed in Table 50 to part 679;
- ◆ Will have an Maximum Length Overall (MLOA) of 60 feet specified on the license;
- ◆ Will have only a catcher vessel designation;
- ◆ Will receive only a non-trawl gear endorsement;

- ◆ Will be assigned a Pacific cod endorsement with a non-trawl gear designation as specified in regulation at 50 CFR 679.4(k)(10)(vi);
- ◆ May not be assigned to any vessel other than the vessel specified for that groundfish license in the annual CQE authorization letter; and
- ◆ May not be assigned for use by any person other than the individual specified for that groundfish license in the annual CQE authorization letter, or any subsequent amendment to that authorization letter that is made by the CQE provided that NMFS receives that amendment prior to that person using that groundfish license aboard a vessel.

GENERAL INFORMATION

Type or print legibly in ink and retain a copy of completed application for your records.

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.

Mail the original completed application form to: **NMFS Alaska Region
Restricted Access Management (RAM)
P.O. Box 21668
Juneau, AK 99802-1668**

Hand Deliver to: Room 713, Federal Building
709 West 9th Street

Or Fax to: (907) 586-7354

If you need additional information, call RAM at: (800) 304-4846 (Option 2) or (907) 586-7202 (Option 2)

COMPLETING THE APPLICATION

BLOCK A – IDENTIFICATION OF APPLICANT

1. Name of Non-Profit Organization: Please provide the name of the non-profit entity seeking to receive a Non-trawl Groundfish LLP License.
2. Name of Contact Person: Name of the contact person for the non-profit organization.
3. NMFS person ID of the non-profit organization.
4. Enter the name of the community on whose behalf the CQE is applying.
5. Permanent Business Mailing Address: Enter permanent mailing address, including street or P.O. Box, city, state, and zip code.
- 6 -7. Business Telephone Number and Fax Number, including the area codes.
8. Business E-mail address.

BLOCK B – NUMBER of CENTRAL GOA NON-TRAWL LLP LICENSES REQUESTED & NON-TRAWL GEAR DESIGNATION

1. Enter the number of Gulf of Alaska LLP Groundfish License that the CQE is requesting on behalf of the eligible community in Block A.4.

Note: A community will not be issued more than the number and type of licenses authorized in Table 50 to Part 679 (see below).

2. Indicate for each license requested, the gear non-trawl type to be designated on each license.

For example, if requesting two Central GOA LLP Non-Trawl Licenses indicate gear on each as follows:

License #1 – Longline Gear

License #2 – Pot Gear

NOTE(s):

- NMFS will issue only pot gear Pacific cod endorsements on groundfish licenses endorsed for the Western Gulf of Alaska (WG) issued to a CQE.
- NMFS will issue either a pot gear or a hook-and-line gear Pacific cod endorsement for a groundfish license with a Central Gulf of Alaska (CG) designation issued to a CQE provided that this application is received by NMFS not later than six (6) months after April 21, 2011. If an application is received more than six months after April 21, 2011, NMFS will issue an equal number of licenses with pot gear and hook-and-line gear Pacific cod endorsements. In cases where the CQE is eligible to receive an odd number of groundfish licenses, NMFS will issue one more groundfish license with pot gear than with hook-and-line gear. For example, if a CQE community may receive five (5) CG groundfish licenses and an application is received more than six months after April 21, 2011, NMFS will issue three (3) licenses with pot gear and two (2) licenses with hook-and-line gear.

BLOCK C - REQUIRED INFORMATION

The non-profit organization applying to receive a non-trawl groundfish LLP license must provide all of the documentation listed in this section. Failure to provide any of the required documentation will result in a denial of this application.

BLOCK D – CQE CERTIFICATION

- 1-3. Enter signature, printed name, and date of application. Representatives acting on behalf of an applicant must supply proof of agent authorization to submit this application on the applicant’s behalf.

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 20 hours per response, including 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 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 as amended in 2006. They are also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics.

CHARTER HALIBUT LIMITED ACCESS PROGRAM	APPLICATION FOR COMMUNITY CHARTER HALIBUT PERMIT (CCHP)	U.S. Department of Commerce NOAA National Marine Fisheries Service Alaska Region Restricted Access Management P.O. Box 21668 Juneau, AK 99802-1668 (800) 304-4846 toll free / (907) 586-7202 in Juneau (907) 586-7354 fax	
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Use a separate application for each community on whose behalf you are requesting a community charter halibut permit.

BLOCK A -- TYPE OF PERMIT
Indicate type of permit for which you are applying. <input type="checkbox"/> Community Charter Halibut Permit An authorized Community Quota Entity (CQE) must apply for this permit on behalf of the eligible community. Complete Blocks A, B, and C. Sign and date Block D. See instructions for list of eligible communities.

BLOCK B -- APPLICANT INFORMATION		
1. Applicant's Name		
2. Business Mailing Address (Street or P.O. Box, City, State, Zip Code):		
3. Business Telephone Number:	4. Business Fax Number:	5. Business E-mail Address:

BLOCK C -- COMMUNITY CHARTER HALIBUT PERMIT(S) REQUEST		
1. Enter the name(s) of the community that the CQE represents (duplicate this page if needed).	2. List the number of charter halibut permits you are requesting for this community:	
3. List the locations, including the latitude and longitude, where all trips will begin or end within the boundaries of the Community for which you are applying. (attach additional pages if necessary).		
Location Name	Latitude	Longitude

BLOCK D – CQE APPLICANT SIGNATURE

Under penalty of perjury, I certify by my signature below that I have examined the information and the claims provided on this application and, to the best of my knowledge and belief, the information presented here is true, correct, and complete. Individual signing this application may be required to provide documentation of his/her authority to apply on behalf of the Applicant.

Signature of Applicant:	Date:
-------------------------	-------

Printed Name of individual completing this application on behalf of CQE	Title of individual completing this application on behalf of CQE
---	--

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average one hour 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 Assistant Regional Administrator, Sustainable Fisheries Division, Alaska Region, NMFS, P.O. Box 21668, Juneau, AK 99802-1668.

ADDITIONAL INFORMATION

Before completing this form please note the following: 1) NMFS may not conduct or sponsor this information request, and you are not required to respond to this information request, unless the form displays a currently valid OMB control number; 2) This information is being used to implement the Charter Halibut Limited Access Program for IPHC Regulatory Areas 2C and 3A; 3) Federal law and regulations require and authorize NMFS to manage charter halibut programs in Alaska; 4) Submission of this information is mandatory for any entity participating in charter halibut fishing; 5) This information is used to monitor the Charter Halibut Limited Access Program under the Northern Pacific Halibut Act of 1982; 6) Responses to this information request are not confidential.

Application Instructions

COMMUNITY CHARTER HALIBUT PERMIT

GENERAL INFORMATION

Application forms are available National Marine Fisheries Service (NMFS) offices and on the NMFS, Alaska Region, web site at <http://www.alaskafisheries.noaa.gov>.

When completed, submit the application by:

By mail to:

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

By fax to:

907-586-7354

Deliver to:

**709 West 9th Street Suite 713
Juneau, Alaska 99801**

Please allow at least **ten 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.

It is important that all blocks are completed and attachments provided. Failure to answer any of the questions or provide any of the required documents could result in delays in the processing of your request for a transfer.

Direct any questions you may have to NMFS, RAM at

1-800-304-4846 (option 2) or 907-586-7202 (option 2).

COMPLETING THE APPLICATION

BLOCK A—TYPE OF PERMIT(S)

Indicate the type of permit(s) for which you are applying.

Community Charter Halibut Permit

A Community Quota Entity (CQE) representing an eligible community may receive one or more community charter halibut permits. A community charter halibut permit issued to a CQE will be designated for area 2C or area 3A, will be non-transferable, and will have an angler endorsement of six (6). The CQE must use a separate application for each community on whose behalf requesting a community charter halibut permit.

If Applicant is a CQE requesting Community Charter Halibut Permits, enter the name of the community represented by the CQE in this application.

Complete Blocks A, B, and C. Sign Block D

NOTE: Each eligible community must form a non-profit entity or CQE to represent it prior to applying for a Community Charter Halibut Permit. This non-profit must apply to NMFS/RAM for certification of eligibility as a CQE using the “Application for a Non-Profit to be Designated as a Community Quota Entity (CQE)”.

Only the following communities are eligible to obtain Community Charter Halibut Permits in the area designated for the community. One Application form must be submitted for each community; multiple communities may not be listed on a single application.

Eligible Communities for 2C Community Charter Halibut Permits	Eligible Communities for 3A Community Charter Halibut Permits
Angoon	Akhiok
Coffman Cove	Chenega
Edna bay	Halibut Cove
Hollis	Karluk
Hoonah	Larsen Bay
Hydaburg	Nanwalek
Kake	Old Harbor
Kassan	Ouzinkie
Klawock	Port Graham
Metlakatla	Port Lions
Meyers Chuck	Seldovia
Pelican	Tatitlek
Point Baker	Tyonek
Port Alexander	Yakutat
Port Protection	
Tenakee	
Thorne Bay	
Whale Pass	

BLOCK B –APPLICANT INFORMATION

1. Applicant’s name
2. Business mailing address (Street or P.O. Box, city, state, zip code)
- 3-5. Business telephone number, business fax number, and business e-mail address

BLOCK C – COMMUNITY CHARTER HALIBUT PERMIT(S) REQUEST

1. Enter the name(s) of the community that the CQE represents.
2. List the number of charter halibut permits you are requesting for this community.

3. List location boundaries of community, including latitude and longitude, where all trips will begin or end.

BLOCK D – CQE APPLICANT SIGNATURE

The individual completing this application must print his/her name, provide his/her title, and sign and date this application. This individual may be required to provide documentation demonstrating his/her authority.

	APPLICATION FOR TRANSFER OF QS/IFQ TO OR FROM A COMMUNITY QUOTA ENTITY (CQE)	U.S. Dept. of Commerce/NOAA National Marine Fisheries Service (NMFS) Restricted Access Management (RAM) P.O. Box 21668 Juneau, AK 99802-1668	
---	---	--	---

This transfer form is only used if a Community Quota Entity (CQE) is the proposed transferor (“seller”) or the proposed transferee (“buyer”) of the Quota Share (QS) or Individual Fishing Quota (IFQ); if not, a different form must be used. The party to whom a CQE is seeking to transfer the QS/IFQ must hold a Transfer Eligibility Certificate (TEC). If the CQE is applying to permanently transfer QS, a representative of the community on whose behalf the QS is held must sign the application.

BLOCK A – TRANSFEROR (“SELLER” OR “LESSOR”) INFORMATION

1. Name:	2. NMFS Person ID:	
3. Name of Community represented by the CQE:		
4. Permanent Business Mailing Address:	5. Temporary Business Mailing Address (<i>see instructions</i>):	
6. Business Telephone No.:	7. Business Fax No.:	8. E-mail address (<i>if available</i>):

BLOCK B – TRANSFEREE (“BUYER” OR “LESSEE”) INFORMATION

1. Name:	2. NMFS Person ID:	
3. Name of Community represented by the CQE:		
4. Permanent Business Mailing Address:	5. Temporary Business Mailing Address (<i>see instructions</i>):	
6. Business Telephone No.:	7. Business Fax No.:	8. E-mail Address (<i>if available</i>):

BLOCK C -- QUESTIONS FOR TRANSFEREE

1. Do you request that this QS be included in a **sweep up**, if possible? YES [] NO []

If **YES**, list the identifier on the QS Certificate into which this new piece should be combined
(Example H-2C-B-B-123,456,789 through H-2C-B-B-123,458,789)

From: ___ - ___ - ___ - ___ - _____ to ___ - ___ - ___ - ___ - _____

(**Reminder:** For sweep-up, **attach** the original QS Certificates of both the transferor and the transferee)

2. If this is a transfer of Catcher Vessel CDQ Compensation QS and the vessel category has never been declared, check the Catcher Vessel Category (D, C, or B) in which you would request your QS issued.

[] **"D"** (0' to 35' Length Over All) [] **"C"** (35' to 60' Length Over All) [] **"B"** (greater than 60' Length Overall)

BLOCK D -- IDENTIFICATION OF QS/IFQ TO BE TRANSFERRED

(Complete this block if QS and IFQ are to be transferred together or if you are applying to transfer QS only)

1. Quota Share to be transferred: Total QS Units: _____

Designation of QS, as shown on the QS Certificate:

From: ___ - ___ - ___ - ___ - _____ to ___ - ___ - ___ - ___ - _____

2. Are all remaining pounds for the current fishing year to be transferred? YES [] NO []

If **NO**, specify the number of pounds to be transferred: _____

Notes:

- **Pounds transferred includes a pro-rata share of any overage based on the QS units held or transferred and is non-negotiable.**
- **Pounds transferred includes a pro-rata share of any underage based on the QS held or transferred UNLESS OTHERWISE INSTRUCTED**

BLOCK E -- TRANSFER OF IFQ ONLY ("LEASE" OF IFQ)

(Pertains only to proposed transfers from CQEs to qualifying community members)

1. Identification of IFQ to be transferred: Permit Number: _____ Year: 20____.

2. Identification of IFQ to be transferred: Permit Number: _____ Year: 20____.

3. Community to which QS are currently assigned: _____

BLOCK F - REQUIRED TRANSFEROR SUPPLEMENTAL INFORMATION

(To be completed by proposed transferor , if a CQE)

1. Indicate the reason(s) you are proposing this transfer (*check all that apply and provide a brief explanation on a separate sheet*).

- | | | | |
|-----------------------------------|--------------------------|---------------------------------------|--------------------------|
| CQE Management and Administration | <input type="checkbox"/> | Participation by Community residents | <input type="checkbox"/> |
| Fund additional QS purchase | <input type="checkbox"/> | Dissolution of Community Quota Entity | <input type="checkbox"/> |
| Other (specify) | <input type="checkbox"/> | _____ | |

2. Give the price per pound (including leases) \$_____ /Pounds of IFQ (*Price divided by IFQ pounds including fees*)

3. Give the price per unit of QS \$_____ /Unit of QS (*Price divided by QS Units*)

4. What is the **total amount** being paid for the QS/IFQ in this transaction, including all fees? \$_____

5. Is there a broker being used for this transaction? YES NO

If YES, how much is being paid in brokerage fees? \$ _____ or _____ % of total price.

6. What are your reasons for transferring the QS/IFQ? (*check all that apply*)

- | | | | | | |
|-------------------------------|--------------------------|--------------------------|--------------------------|---------------------------------|--------------------------|
| Retirement from fisheries | <input type="checkbox"/> | Shares too small to fish | <input type="checkbox"/> | Consolidation of shares | <input type="checkbox"/> |
| Pursue non-fishing activities | <input type="checkbox"/> | Trading shares | <input type="checkbox"/> | Other (<i>please explain</i>) | <input type="checkbox"/> |
| Health problems | <input type="checkbox"/> | Enter other fisheries | <input type="checkbox"/> | _____ | |

BLOCK G -- REQUIRED TRANSFEREE SUPPLEMENTAL INFORMATION

(To be completed by proposed transferee)

1. Will the QS/IFQ being purchased have a lien attached? YES NO

2. **If YES**, please identify the person who will hold the lien:

3. What is the primary source of financing for this transfer (*check one*)?

- | | | | | | |
|---------------------------|--------------------------|---------------------------|--------------------------|--------------------------|--------------------------|
| Personal resources (cash) | <input type="checkbox"/> | AK Com. Fish & Ag. Bank | <input type="checkbox"/> | Received as a gift | <input type="checkbox"/> |
| Private bank/credit union | <input type="checkbox"/> | Transferor/seller | <input type="checkbox"/> | NMFS loan program | <input type="checkbox"/> |
| Alaska Dept. Of Commerce | <input type="checkbox"/> | Processor/fishing company | <input type="checkbox"/> | Other (<i>explain</i>) | <input type="checkbox"/> |
- _____

4. How was the QS/IFQ located (*check all that apply*)?

- | | | | | | |
|-----------------|--------------------------|-----------------------------|--------------------------|--------|--------------------------|
| Relative | <input type="checkbox"/> | Advertisement/public notice | <input type="checkbox"/> | Broker | <input type="checkbox"/> |
| Personal friend | <input type="checkbox"/> | Other (<i>explain</i>) | <input type="checkbox"/> | _____ | |

5. What is your relationship to the Transferor (*check all that apply*)?

No relationship Business partner CQE Community Member

Other (*please explain*) _____

6. Is there an agreement to return the QS or IFQ to the Transferor (seller), or any other person, or a condition placed on resale?

YES NO

If YES, please explain: _____

BLOCK H -- CERTIFICATION OF TRANSFEROR

Under penalty of perjury, I swear, or affirm, that I have examined this application and, to the best of my knowledge and belief, the information presented hereon is true, correct, and complete.

1. Signature of transferor or authorized agent:	2. Date:
3. Printed name of transferor or authorized agent (<i>Note: If an agent, authorization must be attached</i>):	
4. ATTEST (Signature of Notary Public):	6. Affix Notary Stamp or Seal Here:
5. Commission Expires:	

BLOCK I -- CERTIFICATION OF TRANSFEREE

Under penalty of perjury, I swear, or affirm, that I have examined this application and, to the best of my knowledge and belief, the information presented hereon is true, correct, and complete. Also, if I am only receiving IFQ, I further swear, or affirm, that I am a permanent resident of the community (listed in Block F) on whose behalf the CQE is proposing to transfer the IFQ, that I have been a resident for at least 12 months, and that I intend to remain a resident.

1. Signature of transferee or authorized agent:	2. Date:
3. Printed name of transferee or authorized agent (<i>Note: If an agent, authorization must be attached</i>):	
4. ATTEST (Signature of Notary Public):	6. Affix Notary Stamp or Seal Here:
5. Commission Expires:	

BLOCK J -- CERTIFICATION OF CQE COMMUNITY REPRESENTATIVE
(Required only when CQE proposes to permanently transfer Quota Share)

I am a duly authorized representative of the community (listed in Block C or Block D) on whose behalf the CQE is proposing to transfer QS; by my signature below, I attest that the applicant CQE has the approval of our community to complete this permanent QS transfer, for the reasons set out on this application.

1. Signature of Community Representative:	2. Date:
3. Printed name and title Community Representative	
4. ATTEST (Signature of Notary Public):	6. Affix Notary Stamp or Seal Here:
5. Commission Expires:	

PUBLIC REPORTING BURDEN STATEMENT

Public reporting 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 this 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) The information collected is confidential under section 402(b) of the Magnuson-Stevens Act, as amended in 2006. They are also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics.

<p style="text-align: center;">Instructions APPLICATION TO TRANSFER QS/IFQ TO, OR FROM, A COMMUNITY QUOTA ENTITY (CQE)</p>

This application is to be used **ONLY** to apply for a transfer of quota share (QS) or individual fishing quota (IFQ) to or from a CQE. If a CQE is not a party to the proposed transfer, another application should be used.

Any party to whom the QS/IFQ is proposed to be transferred must hold a Transfer Eligibility Certificate (TEC).

If the application is to permanently transfer QS from a CQE to another party, the application must be signed by a representative of the community for whom the CQE holds the QS.

GENERAL INFORMATION

The halibut and sablefish IFQ Program is administered by the Restricted Access Management (RAM) Program of the Alaska Region, National Marine Fisheries Service (NMFS). Transfers of all Quota Share (QS) and its associated annual individual fishing quota (IFQ) must be approved, in advance, by RAM.

The IFQ Program provides opportunities for small communities located on the coast of the Gulf of Alaska to hold, and to fish, QS and IFQ. Such communities are represented by Community Quota Entities (CQEs), who must use a special application to provide for transfers of QS/IFQ to and from (and between) CQEs. These instructions are designed to help you to use that special transfer application form. Some general rules pertain, as follows:

- ✓ Please submit a separate application for each proposed QS or IFQ permit transfer.
- ✓ Please complete the entire application, including all attachments; failure to do so could result in delays in the processing of your application.
- ✓ Please submit an original application only -- a photocopy of an application, or an application submitted by facsimile will not be processed.
- ✓ RAM will not process an application that does not bear original signatures (faxed applications will be returned). All signatures must be witnessed by a Notary Public (or, in some remote areas, the community Postmaster or Postmistress).
- ✓ An application submitted and signed by an agent for a party to the transfer will not be processed unless clear and unambiguous certification of the agent's authority to do so is provided

When completed, submit the original application

By mail to: **Alaska Region, National Marine Fisheries Service
Restricted Access Management (RAM)
P.O. Box 21668
Juneau, AK 99802-1668**

or deliver to: **Room 713, Federal Building
709 West 9th Street**

Please allow at least **ten working days** for your application to be processed. Without exception, RAM processes applications in the order in which they are received.

Items will be sent to you by first class mail, unless you provide alternate instructions and include a prepaid mailer with appropriate postage or corporate account number for express delivery.

If you have any questions, or if you need any assistance in completing the application, please contact RAM as follows:

Telephone (toll Free): 1-800-304-4846 (press "2")

Telephone (Juneau): 907-586-7202

E-Mail Address: RAM.Alaska@noaa.gov

Web Site: www.alaskafisheries.noaa.gov/ram

COMPLETING THE APPLICATION

BLOCK A – TRANSFEROR (SELLER OR LESSOR) INFORMATION

1. Legibly print or type the name of the party proposing to transfer the QS/IFQ; this should be the party's full name as it appears on the QS Certificate or the TEC.
2. Enter the "NMFS Person ID" (as set out on the QS Certificate or the TEC)
3. If the proposed transferor is a CQE, enter the name of the community on whose behalf the CQE is applying.
4. Enter the permanent business mailing address.
5. If appropriate, enter the temporary business mailing address (the address to which the transfer documentation should be sent, if different from the permanent address).
- 6-8. Enter business telephone number, business fax number, and e-mail address (if available).

BLOCK B – TRANSFEREE (BUYER OR LESSEE) INFORMATION

1. Legibly print or type the name of the party proposing to receive by transfer the QS/IFQ.
2. Enter the "NMFS Person ID" (as set out on the QS Certificate or the TEC)
3. If the proposed transferee is a CQE, enter the name of the community represented by the CQE.
4. Enter the permanent business mailing address.
5. If appropriate, enter the temporary business mailing address (the address to which the transfer documentation should be sent, if different from the permanent address).
- 6-8. Enter business telephone number, business fax number, and e-mail address (if available).

BLOCK C – QUESTIONS FOR TRANSFEREE

1. Indicate if you wish to combine (“sweep up”) the transferred QS with a block that is currently held. Blocked QS may be combined into one block if the resulting total amount of QS is less than or equal to the following amounts of QS units:

Halibut		Sablefish	
Area	Units	Area	Units
2C	19,992	SE	33,270
3A	27,912	WY	43,390
3B	22,947	CG	46,055
4A	22,947	WG	48,410
4B	15,087	AI	99,210
4C	30,930	BS	91,275
4D	26,082		

NOTE: if you wish to sweep up the QS into an existing block, you must fully identify the QS block into which you wish to combine the transferred QS; to do so, complete the blanks by entering the letters and numbers as set out on your QS certificate.

2. If this is a transfer of Catcher Vessel “CDQ compensation QS” that has not yet been assigned a catcher vessel length category, you may designate the category. To do so, check the appropriate box (indicating vessel length) to which you wish the QS assigned (note that this will be a permanent assignment of vessel length category).

BLOCK D – IDENTIFICATION OF QS/IFQ TO BE TRANSFERRED

Complete this block if QS and IFQ are to be transferred together or to transfer QS only.

1. Enter the total QS units to be transferred and the designation of those QS units (as set out on the QS Certificate).
2. Indicate whether all remaining IFQ pounds from the current fishing year are to be transferred with the QS; **if NO**, indicate the number of pounds that are to be transferred.

NOTE:

Pounds transferred includes a pro-rata share of any overage based on the QS units held or transferred and is non-negotiable.

Pounds transferred includes a pro-rata share of any underage based on the QS held or transferred UNLESS OTHERWISE INSTRUCTED

BLOCK E – TRANSFER OF IFQ ONLY (“LEASE” OF IFQ)

This block should only be completed if the CQE is applying to transfer IFQ to a permanent resident of the community on whose behalf the CQE holds the QS.

1. Identify the IFQ to be transferred by entering the IFQ Permit Number and Year
2. Enter the name of the community to which QS are currently assigned.

BLOCK F – REQUIRED TRANSFEROR SUPPLEMENTAL INFORMATION

1. If the proposed transferor is a CQE, indicate the reason(s) transfer is being proposed. Check all that apply and provide a brief explanation on a separate sheet.
2. Provide the price per pound of IFQ.
3. Provide the price per unit of QS.
4. Indicate total amount paid for the QS/IFQ in this transactions, including all fees.
5. Indicate YES or NO whether a broker is used for this transaction.
If YES, indicate amount paid in brokerage fees or percentage of total price.
6. Indicate reason(s) for transferring QS/IFQ (check all that apply)

BLOCK G – REQUIRED TRANSFEREE SUPPLEMENTAL INFORMATION

1. Indicate YES or NO whether the QS/IFQ will have a lien attached
If YES, identify the person who will hold the lien
2. Indicate primary source of financing for this transfer (check one)
3. Indicate how the QS/IFQ was located (check all that apply)
4. Indicate relationship to the transferor (check all that apply)
5. Indicate YES or NO whether an agreement exists to return the QS or IFQ to the transferor or any other person or a condition place on resale.
If YES, explain

BLOCK H -- CERTIFICATION OF TRANSFEROR

1. Enter printed name and signature of Transferor and date signed
If completed by an authorized agent, attach authorization
2. Signature, commission expiration date, and stamp of notary public

BLOCK I -- CERTIFICATION OF TRANSFEREE

1. Enter printed name and signature of Transferee and date signed
If completed by an authorized agent, attach authorization
2. Signature, commission expiration date, and stamp of notary public

BLOCK J -- CERTIFICATION OF CQE COMMUNITY REPRESENTATIVE

Required when CQE proposes to permanently transfer QS

1. Enter signature of Community Representative and date signed
2. Enter printed name and title of Community Representative
3. Signature, commission expiration date, and stamp of notary public

**CHARTER
HALIBUT
LIMITED
ACCESS
PROGRAM****APPLICATION FOR TRANSFER
(LEASE) Between
Individual Fishing Quota(IFQ) And
Guided Angler Fish (GAF)**

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

**GENERAL REQUIREMENTS**

This application form is for use in transferring 2C or 3A commercial individual fishing quota (IFQ) for use as guided angler fish (GAF) by persons holding charter halibut permits for areas 2C or 3A. This form should also be used to return unused GAF to the IFQ permit holder from which it was obtained.

Use this block to determine what information must be included with your transfer. Please check each applicable box below to ensure that your application is complete and can be processed in a timely manner.

- Completed Application
 Copy of IFQ permit (s) enclosed
 Copy of Charter Halibut Permit (Transferee receiving GAF must have a valid Charter Halibut Permit)
 Power of Attorney (if applicable)

Notes:

- Voluntary transfers to return GAF fish to the IFQ Permit Holder may only be submitted during the month of August. Voluntary returns of unused GAF will be processed on or about September 1st.**
- NMFS will return all unharvested GAF to the IFQ permit holder 15 days prior to the end of the fishing season.**
- The IFQ permit holder is responsible for all cost recovery fees resulting from the GAF harvested as a result of this transfer. Unused GAF will be returned to the IFQ permit holder from which they were obtained; no fees will be assessed for any unused GAF unless it is later harvested by the IFQ permit holder.**

BLOCK A - IDENTIFICATION OF TRANSFEROR (LESSOR)

1. Name of Transferor:		2. NMFS Person ID:	
3. Permanent Business Mailing Address:		4. Temporary Business Mailing Address:	
5. Business Telephone Number:	6. Business Fax Number:	7. E-mail Address:	
8. Has transferor paid all fees, as required by § 679.45?			
YES <input type="checkbox"/>		NO <input type="checkbox"/>	
NOT APPLICABLE <input type="checkbox"/>			

BLOCK B - IDENTIFICATION OF TRANSFEREE (LESSEE)

1. Name of Transferee:		2. NMFS Person ID:	
3. Permanent Business Mailing Address:		4. Temporary Business Mailing Address:	
5. Business Telephone Number:	6 Business Fax Number:	7. E-mail Address:	
8. Has transferee paid all fees, as required by § 679.45?			
YES [<input type="checkbox"/>]		NO [<input type="checkbox"/>]	
NOT APPLICABLE [<input type="checkbox"/>]			

BLOCK C -- IDENTIFICATION OF IFQ AND/OR GAF TO BE TRANSFERRED

IFQ Permit Number	IPHC Area	Charter Halibut Permit Number	GAF Permit Number <small>(only required when GAF is returning to the IFQ permit holder)</small>	Number of GAF* <small>(number of fish not pounds)</small>

*The number of fish requested will be deducted from or added to the annual IFQ permit in round weight equivalent pounds. See annual conversation table to determine the number of pounds that will be added or subtracted from the annual IFQ permit. The conversion rate cannot be challenged.

CERTIFICATION OF TRANSFEROR

Under penalty of perjury, I swear, or affirm, that I have examined this application and, to the best of my knowledge and belief, the information presented hereon is true, correct, and complete.

1. Signature of Transferor:	2. Date:
3. Printed Name of Transferor: (If authorized representative, attach authorization)	
4. ATTEST (Signature of Notary Public):	6. Affix Notary Stamp or Seal Here:
5. Commission Expires:	

CERTIFICATION OF PROPOSED TRANSFEREE

Under penalty of perjury, I swear, or affirm, that I have examined this application and, to the best of my knowledge and belief, the information presented hereon is true, correct, and complete.

1. Signature of Transferee:	2. Date:
3. Printed Name of Transferee: (If authorized representative, attach authorization):	
4. ATTEST (Signature of Notary Public):	6. Affix Notary Stamp or Seal Here:
5. Commission Expires:	

PUBLIC REPORTING BURDEN STATEMENT

Public reporting for this collection of information is estimated to average 2.5 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 this 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 680, 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 as amended in 2006. They are also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics.

<p style="text-align: center;">Instructions Application For Transfer (Lease) Between Individual Fishing Quota(IFQ) and Guided Angler Fish (GAF)</p>
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GENERAL INFORMATION

This application form is for use in transferring 2C or 3A commercial individual fishing quota (IFQ) for use as guided angler fish (GAF) by persons holding charter halibut permits for areas 2C or 3A. This form should also be used to return unused GAF to the IFQ permit holder from which it was obtained. **Note: Voluntary returns of unused GAF to the IFQ Permit Holder will only be processed during the month of August. NMFS will not transfer IFQ to GAF after November 1st and will return all unharvested GAF to the IFQ permit holder on or about November 1st each year.**

This application may only be used to apply for a transfer of IFQ for the current Halibut fishing year. NMFS will notify the transferor and transferee once the application has been received and approved. A transfer is not effective until approved by NMFS.

This application cannot be processed or approved unless both parties to the proposed transfer have met all the requirements and conditions of the IFQ Program, including (as appropriate):

- The transferee requesting GAF must hold a valid Charter Halibut Permit (this includes community charter halibut permit or military charter halibut permit).
- Neither party to the transfer has any outstanding fines, civil penalties or other payments due and owing, or outstanding permit sanctions.
- A Transfer of IFQ to GAF will not be approved if it would cause the parties to exceed the use limits in 50 CFR xxxxx(c)(5)(i)(G)(3) or 50 CFR 679.42(e) or (f).
- Payment of all outstanding fees to NMFS

Note: The IFQ permit holder is responsible for all cost recovery fees resulting from the GAF harvested as a result of this transfer. Unused GAF will returned to the IFQ permit holder from which they were obtained; no fees will be assessed for any unused GAF unless it is harvested by the IFQ permit holder prior to the close of the current fishing year. The GAF cost recovery fees will be charged at the same percentage rate as the commercial IFQ fees. GAF fees will be calculated using a standard price established for IPHC areas 2C and 3A using annual commercial IFQ values provided by annually by IFQ Registered Buyers. This standard value may not be challenged (i.e. actual values may not be substituted).

ADDITIONALLY

- ◆ Print information in the application legibly in ink or type information.
- ◆ Retain a copy of completed application for your records.
- ◆ Do not wait until right before an opening to apply for your permit, as you may not receive it on time. Please **allow up to ten working days** for a transfer application to be reviewed, processed, and approved; the parties will be notified upon approval or disapproval of the transfer.

◆ Submit the completed application:

By mail to: **Alaska Region, NOAA Fisheries (NMFS)
Restricted Access Management (RAM)
P.O. Box 21668
Juneau, AK 99802-1668**

By fax to RAM at: **907-586-7354**

Applications may be faxed to RAM at (907) 586-7354; however, permits will not be returned by fax. The original, signed permit must be on board the vessel.

Or by courier to: **NOAA Fisheries
Alaska Region (NMFS/RAM)
Federal Building
709 W. 9th Street, Suite 713
Juneau, Alaska 99801**

Items will be sent to you by first class mail, unless you provide alternate instructions and include a prepaid mailer with appropriate postage or a corporate account number for express delivery. Additional information is available from RAM, as follows:

Website: <http://www.alaskafisheries.noaa.gov/ram/default.htm>

Telephone (toll free): 800-304-4846 (press “2”)

Telephone (in Juneau): 907-586-7202 (press “2”)

e-Mail: RAM.Alaska@noaa.gov

COMPLETING THE FORM

BLOCK A – IDENTIFICATION OF TRANSFEROR (“LESSOR”)

1. Enter the full name of the person who intends to transfer the annual IFQ.
2. Enter transferor’s NMFS Person ID.
3. Enter the transferor’s permanent business mailing address.
4. Enter the transferor’s temporary business mailing address (this is the address, if different from #4, to which the applicant wishes materials to be sent).
- 5 - 7. Enter the transferor’s business telephone number, business fax number, and e-mail address.
8. Indicate whether transferor has paid all fees, as required by § 679.45.

BLOCK B – IDENTIFICATION OF TRANSFEREE (“LESSEE”)

1. Enter the full name of the person who intends to transfer the annual IFQ.
2. Enter transferor’s NMFS Person ID.
3. Enter the transferor’s permanent business mailing address.
4. Enter the transferor’s temporary business mailing address (this is the address, if different from #4, to which the applicant wishes materials to be sent).
- 5 – 7. Enter the transferor’s business telephone number, business fax number, and e-mail address.
8. Indicate whether transferor has paid all fees, as required by § 679.45.

BLOCK C -- IDENTIFICATION OF IFQ AND/OR GAF TO BE TRANSFERRED

- Enter the IFQ permit number of the 2C or 3A halibut quota share holder
- Enter the International Pacific Halibut (IPHC) management area for the IFQ permit
- Enter the Charter Halibut Permit number of the transferee requesting a guided angler fish (GAF)
- Enter the GAF Permit number, if applicable, for a transfer of GAF back to the IFQ Permitholder
- Enter the number of GAF requested in this transfer, expressed as number of fish not pounds of fish.

Note: The number of GAF requested will be deducted from or added to the annual IFQ permit in round weight equivalent pounds. See annual conversation table to determine the number of pounds that will be added or subtracted from the annual IFQ permit. The conversion rate cannot be challenged.

BLOCKS D AND E – CERTIFICATION OF TRANSFEROR AND TRANSFEREE

Print name, sign, and enter date of signature of both the transferor and transferee. Note, that if an authorized representative is completing the form, full authorization must be attached.