NOTICE OF OFFICE OF MANAGEMENT AND BUDGET ACTION

Date 03/23/2015

Department of Commerce
National Oceanic and Atmospheric Administration

FOR CERTIFYING OFFICIAL: Jerry Harper
FOR CLEARANCE OFFICER: Jennifer Jessup

In accordance with the Paperwork Reduction Act, OMB has taken action on your request received 01/21/2015

ACTION REQUESTED: Revision of a currently approved collection
TYPE OF REVIEW REQUESTED: Regular
ICR REFERENCE NUMBER: 201501-0648-002
AGENCY ICR TRACKING NUMBER:
TITLE: Alaska Rockfish Program: Permits and Reports
LIST OF INFORMATION COLLECTIONS: See next page

OMB ACTION: Approved without change
OMB CONTROL NUMBER: 0648-0545
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: 03/31/2018 DISCONTINUE DATE:

BURDEN:	RESPONSES	HOURS	COSTS
Previous	513	490	353
New	126	414	74
Difference			
Change due to New Statute	0	0	0
Change due to Agency Discretion	-60	-137	-77
Change due to Agency Adjustment	-327	61	-202
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 Rockfish Cooperative Fishing Quota (CQ)	NA	Application for Rockfish Cooperative Quota	
Application for Inter-Cooperative Transfer of Rockfish CQ	NA	Application for intercooperative transfer of rockfish CQ	
Annual Rockfish Cooperative Report			50 CFR 679.5(r)
Vessel Check-in/Check-out Report with Termination of Fishing Declaration	NA	Rockfish program vessel check-in/checkout and termination of fishing	
Rockfish Ex-vessel Volume and Value Report	NA	Rockfish Ex-Vessel Volume and Value Report	
Rockfish fee payment	NA	Rockfish fee payment form	

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
DOC/NOAA/NMFS/AKR

2. OMB control number b. [ ] None
a. 0648 - 0545

3. Type of information collection (*check one*)
a. [ ] New Collection
b. [ ] Revision of a currently approved collection
c. [✔] Extension of a currently approved collection
d. [ ] Reinstatement, without change, of a previously approved collection for which approval has expired
e. [ ] Reinstatement, with change, of a previously approved collection for which approval has expired
f. [ ] Existing collection in use without an OMB control number
For b-f, note Item A2 of Supporting Statement instructions

4. Type of review requested (*check one*)
a. [✔] Regular submission
b. [ ] Emergency - Approval requested by ____/____/____
c. [ ] Delegated

5. Small entities
Will this information collection have a significant economic impact on a substantial number of small entities? [ ] Yes [✔] No

6. Requested expiration date
a. [✔] Three years from approval date b. [ ] Other Specify: ____/____

7. Title Alaska Rockfish Program: Permits and Reports

8. Agency form number(s) (*if applicable*)

9. Keywords fisheries, fishing

10. Abstract

The Rockfish Program was designed to enhance resource conservation and improve economic efficiency in the rockfish fisheries by establishing cooperatives that receive exclusive harvest privileges. The Rockfish Program is authorized for 10 years, until December 31, 2021. The National Marine Fisheries Service (NMFS) assigns rockfish quota share (QS) to License Limitation Program (LLP) licenses for rockfish primary and secondary species based on legal landings associated with that LLP. Each year, an LLP license holder assigns the LLP license with rockfish QS to a rockfish cooperative. Each rockfish cooperative receives an annual cooperative fishing quota (CQ), which is an amount of primary and secondary rockfish species the cooperative is able to harvest in that fishing year. Halibut Prohibited Species Catch is also allocated to participants based on historic halibut mortality rates in the primary rockfish species fisheries. The rockfish fisheries are conducted in Federal waters near Kodiak, Alaska, by trawl and to a lesser extent by longline vessels. Shoreside processors receiving rockfish CQ must be located within the boundaries of the City of Kodiak.

11. Affected public (*Mark primary with "P" and all others that apply with "x"*)
a. x Individuals or households d. ___ Farms
b. P Business or other for-profit e. ___ Federal Government
c. ___ Not-for-profit institutions f. ___ State, Local or Tribal Government

12. Obligation to respond (*check one*)
a. [ ] Voluntary
b. [✔] Required to obtain or retain benefits
c. [ ] Mandatory

13. Annual recordkeeping and reporting burden
a. Number of respondents 9
b. Total annual responses 126
1. Percentage of these responses collected electronically 85 %
c. Total annual hours requested 414
d. Current OMB inventory 490
e. Difference -76
f. Explanation of difference
1. Program change -137
2. Adjustment 61

14. Annual reporting and recordkeeping cost burden (*in thousands of dollars*)
a. Total annualized capital/startup costs 0
b. Total annual costs (O&M) 0
c. Total annualized cost requested 0
d. Current OMB inventory 0
e. Difference 0
f. Explanation of difference
1. Program change
2. Adjustment

15. Purpose of information collection (*Mark primary with "P" and all others that apply with "X"*)
a. x Application for benefits e. ___ Program planning or management
b. p Program evaluation f. ___ Research
c. ___ General purpose statistics g. x Regulatory or compliance
d. ___ Audit

16. Frequency of recordkeeping or reporting (*check all that apply*)
a. [✔] Recordkeeping b. [ ] Third party disclosure
c. [ ] Reporting
1. [✔] On occasion 2. [ ] Weekly 3. [ ] Monthly
4. [ ] Quarterly 5. [ ] Semi-annually 6. [✔] Annually
7. [ ] Biennially 8. [ ] Other (describe) ____

17. Statistical methods
Does this information collection employ statistical methods
[ ] Yes [✔] No

18. Agency Contact (person who can best answer questions regarding the content of this submission)
Name: Patsy A. Bearden
Phone: (907) 586-7008

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 signed by Emily Menashes for Alan Risenhoover	Date 1/21/2015
Signature of NOAA Clearance Officer	
Signature BRABSON.SARAH.1365710488 Digitally signed by BRABSON.SARAH.1365710488 DN: c=US, o=U.S. Government, ou=DoD, ou=PKI, ou=OTHER, cn=BRABSON.SARAH.1365710488 Date: 2015.04.13 14:10:05 -04'00'	Date

SUPPORTING STATEMENT
ALASKA ROCKFISH PROGRAM: PERMITS AND REPORTS
OMB CONTROL NO. 0648-0545

This action is a request for revision and extension of an existing information collection. Information collections that were no longer applicable have been removed.

INTRODUCTION

The National Marine Fisheries Service (NMFS) manages the groundfish fisheries in the Exclusive Economic Zone (EEZ) off the coast of Alaska under the Fishery Management Plan (FMP) for Groundfish of the Bering Sea and Aleutian Islands Management Area, the Fishery Management Plan for Groundfish of the Gulf of Alaska (GOA), and the Northern Pacific Halibut Act of 1982. The FMPs were prepared by the North Pacific Fishery Management Council (Council) under the Magnuson-Stevens Fishery Conservation and Management Act as amended in 2006. Regulations implementing these procedures are located at 50 CFR part 679.

The Council adopted the Central GOA Rockfish Program (Rockfish Program) on June 14, 2010, to replace the expiring Rockfish Pilot Program. The Rockfish Pilot Program was designed to enhance resource conservation and improve economic efficiency in the rockfish fisheries by establishing cooperatives that receive exclusive harvest privileges. The Rockfish Program includes similar implementation, management, monitoring, and enforcement measures to those developed for and used in the Pilot Program. The Rockfish Program is authorized for 10 years, until December 31, 2021.

BACKGROUND

NMFS assigns rockfish quota share (QS) to License Limitation Program (LLP) licenses for rockfish primary and secondary species based on legal landings associated with that LLP. Primary rockfish species are northern rockfish, Pacific ocean perch, and pelagic shelf rockfish. Secondary rockfish species are Pacific cod, rougheye rockfish, shortraker rockfish, sablefish, and Thornyhead rockfish.

Each year, an LLP license holder assigns the LLP license with rockfish QS to a rockfish cooperative. Each rockfish cooperative receives an annual cooperative fishing quota (CQ), which is an amount of primary and secondary rockfish species the cooperative is able to harvest in that fishing year. Halibut Prohibited Species Catch (PSC) is also allocated to participants based on historic halibut mortality rates in the primary rockfish species fisheries. The rockfish fisheries are conducted in Federal waters near Kodiak, Alaska, by trawl and to a lesser extent by longline vessels. Shoreside processors receiving rockfish CQ must be located within the boundaries of the City of Kodiak.

A. JUSTIFICATION

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

The Rockfish Program was developed to improve the economic efficiency of the Central GOA rockfish fisheries by developing a program to establish cooperatives to receive exclusive harvest privileges. The Program was designed to create a slower-paced fishery which would allow the harvester to choose when to fish. The Program also provides greater stability for processors by spreading out production over a greater period of time.

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 Rockfish Program regulates the formation of cooperatives and the use of the annual catch amount by the cooperatives. In addition to the requirements to join a cooperative, an eligible rockfish harvester or eligible rockfish processor must meet specific requirements that differ between the catcher vessel sector and the catcher/processor sector.

a. Application for Rockfish Quota Share (QS) [REMOVED]

The one-time deadline for submitting an Application for Rockfish Quota Share (QS) was January 17, 2012. This application was used to identify participants in the rockfish fisheries.

The term "quota share" is used to describe the Rockfish Program's multi-year exclusive harvest privileges based on historic harvest activities. Rockfish QS is an attribute of the LLP license (see OMB Control No. 0648-0334). After calculating the amount of QS to allocate to an LLP license, NMFS modifies that LLP license and designates that amount on the license. QS assigned to an LLP license cannot be transferred independent from that LLP license, except to comply with the use caps.

b. Application for Rockfish Cooperative Fishing Quota (CQ) (CHANGED).

Each calendar year, the Regional Administrator determines the tonnage of rockfish primary species that will be assigned to participants in a rockfish cooperative. The members of a rockfish cooperative have an exclusive harvest privilege to collectively catch this CQ.

Only persons who hold rockfish QS may join a rockfish cooperative. Each year the holder of an LLP license with rockfish QS must assign that LLP license to a rockfish cooperative in order to participate in the Rockfish Program. Rockfish QS can only be fished through cooperative membership.

The cooperative must form an association with the processor to which it historically delivered the most rockfish. The cooperative/processor associations are intended to ensure that a cooperative lands a substantial portion of its catch with its members' historic processor. The

exact terms of the association are subject to negotiation, are confidential to the parties, and require the approval of the associated processor.

Application forms are available through the Internet on the NMFS Alaska Region Web site at http://alaskafisheries.noaa.gov/sustainablefisheries/rockfish or by contacting NMFS at 907-586-7228 or 800-304-4846, Option 2.

A completed application must be received by NMFS no later than 1700 hours, A.l.t., March 1 or if sent by U.S. mail, the application must be postmarked by that time. This application may be submitted to NMFS using the methods described below.

by mail to:	NMFS Alaska Region Restricted Access Management (RAM) P.O. Box 21668 Juneau, AK 99802-1668
by delivery to:	Room 713, Federal Building 709 West 9th Street Juneau, AK
by fax to:	(907) 586-7354

A copy of all applications must be retained, regardless of submittal method.

Application for Rockfish Cooperative Fishing Quota (CQ)

Block A – Rockfish Cooperative Identification
- Legal name and NMFS person ID
- Type of business entity under which cooperative is organized
- State in which legally registered as a business entity
- Date of incorporation
- Name of authorized representative
- Permanent business address, including P.O. Box or street address, city, state, and zip code
- Business telephone number and fax number, including area code
- Business e-mail address

Block B – Members of the Rockfish Cooperative (LLP holder and ownership documentation)
- Full name of member and NMFS Person ID
- LLP license number(s)
- List all persons, to the individual level, holding an ownership interest in the LLP(s) assigned to the cooperative and percent of ownership each person and individual holds in the LLP license(s)

Block C – Identification of Rockfish Cooperative Member Vessels
- Vessel name, ADF&G vessel registration number, and USCG documentation number

Block D – Shoreside Processor Associates of the Rockfish Cooperative
- Processor name and NMFS person ID
- Facility name
- ADF&G processor code
- Federal processor permit (FPP) number

Block E – Certification of cooperative
- Printed name and signature of authorized representative and date signed

Block F – Certification of Processor Associate
- Printed name and signature of authorized representative and date signed

Attachments

Copy of business license issued by the state in which the Cooperative is registered as a business entity;
Copy of articles of incorporation or partnership agreement of the Rockfish Cooperative
Copy of the cooperative agreement signed by the members of the Rockfish Cooperative.

The Cooperative Agreement

- □ must include specific monitoring procedures
- □ may include any voluntary codes of conduct that apply to the members of the cooperative
- □ may specify the obligations of rockfish cooperative members to ensure the full payment of rockfish cost recovery fees that may be due.

Note: The Articles of incorporation or cooperative agreement submitted by the Rockfish Cooperative must specify that the eligible processor does not participate in price setting negotiations except to the extent permitted by general antitrust law.

Changed number of respondents from 6 to 9, based on actual count of cooperatives. Personnel cost is changed from $25/hr to $37/hr to reflect current rates. Changed number of pages to be copied from 10 to 5.

Application for Rockfish Cooperative CQ, Respondent	
Number of respondents	**9**
Total annual responses (1 response per respondent)	**9**
Total burden hours	**18 hr**
Time per response = 2 hr	
Total personnel cost ($37/hr x 18)	**$666**
Total miscellaneous costs (25.65)	**$26**
Postage cost (0.90 x 6 = 5.40)	
Photocopy cost (0.05 x 5pp x 9 = 2.25)	
Fax cost ($6 x 3 = 18)	

Application for Rockfish Cooperative CQ, Federal Government	
Total responses	**9**
Total burden hours (4.50)	**5 hr**
Time per response = 30 min	
Total personnel cost ($37/hr x5)	**$185**
Total miscellaneous cost	**0**

c. <u>Application for Inter-Cooperative Transfer of CQ (CHANGED)</u>.

Each rockfish cooperative receives an annual cooperative fishing quota (CQ). The CQ is an amount of primary and secondary rockfish species the cooperative is able to harvest in a given fishing year. Halibut Prohibited Species Catch (PSC) is also allocated to participants based on historic halibut mortality rates in the primary rockfish species fisheries. Shore-based processors receiving rockfish CQ must be located within the boundaries of the City of Kodiak, Alaska.

Once NMFS issues annual CQ to a cooperative, the members of the cooperative may fish on that amount or may transfer catch amounts to another cooperative. The transfer of an annual catch amount is valid only during the calendar year of the transfer. A rockfish cooperative may transfer all or part of its CQ to another rockfish cooperative. A cooperative may only transfer or receive by transfer an annual catch amount if the cooperative submits online an application for inter-cooperative transfer to NMFS.

In order for NMFS to approve an inter-cooperative transfer, both parties must be already established and recognized by NMFS as a cooperative prior to the transfer. Under the Program, catcher/processor cooperatives are not permitted to *receive* quota transfers from catcher vessels cooperatives. This "one-way door" is intended to protect interests of shore plants and communities, in the event that catcher/processor production efficiencies exceed those of the shore-based sector.

The Inter-cooperative Transfer of CQ must be submitted to NMFS online through eFISH on the NMFS Alaska Region website at https://alaskafisheries.noaa.gov/webapps/efish/login. By using the NMFS ID password and submitting the transfer request, the designated representative certifies that all information is true, correct, and complete.

Electronic submittal of Inter-cooperative Transfer of CQ

Using eFISH, }
NMFS Person ID } Replaces Block A, Block B, Block E, and Block F in online version
Transfer key }

Data Elements of Application for Inter-Cooperative Transfer of CQ

Block A -- Identification of transferor
- Name and NMFS Person ID of transferor
- Name of designated representative
- Permanent business mailing address including P.O. Box or street address, city, state, and zip code
  - Enter temporary mailing address, if appropriate
- Business telephone number and fax number, including area code
- Business e-mail address

Block B -- Identification of transferee
- Name and NMFS Person ID of transferee
- Name of designated representative
- Permanent business mailing address, including P.O. Box or street address, city, state, and zip code.
  - Enter temporary mailing address, if appropriate
- Business telephone number and fax number, including area code
- Business e-mail address

Block C -- Identification of Rockfish Cooperative member
- Name and NMFS person ID of member to whose use cap the rockfish cooperative CQ will be applied
- Amount of CQ applied (in mt)

Block D – CQ to be transferred
- Identify the type and amount of primary species, secondary species, or rockfish halibut PSC CQ
  - to be transferred

Block E -- Certification of transferor and processor.
- Signature of transferor and date signed
- Signature of eligible rockfish processor (associated with cooperative)
- Printed name of transferor (or authorized representative); if representative, attach authorization
- Printed name of eligible rockfish processor associated with cooperative; if representative, attach authorization

Block F -- Certification o f transferee and processor.
- Signature of transferee and date signed
- Signature of eligible rockfish processor and date signed
- Printed name of transferee (or authorized representative); if representative, attach authorization
- Printed name of eligible rockfish processor associated with cooperative); if representative, attach authorization

Changed personnel cost from $25/hr to $37/hr. Changed number of respondents from 6 to 9. Changed cost to submit from 1 hr to 30 minutes. Removed fax and postage as submittal methods because can only be submitted online.

Application for Inter-Cooperative Transfer of Rockfish CQ, Respondent	
Number of respondents	**9**
Total annual responses (3 x 9) 3 transfers per coop per season	**27**
Total annual time burden hours (4.5) Time per response = 10 minutes	**5 hr**
Total personnel cost (5 x $37/hr)	**$185**
Total miscellaneous cost (1.35) Must be Online (0.05 x 27 = 1.35)	**$1**

There are no costs to the Federal Government, because the form is automatic and goes directly into the database.

Application for Inter-Cooperative Transfer of Rockfish CQ, Federal Government	
Total responses	**0**
Total burden hours	**0**
Total personnel cost	**0**
Total miscellaneous cost	**0**

d. Annual Rockfish Cooperative Report [CHANGED]

Each Rockfish cooperative must submit an annual Rockfish Cooperative report to NMFS detailing the use of the cooperative's CQ by December 15 of each year. No form exists for this information.

The annual rockfish cooperative report may be submitted to the Regional Administrator

by email to	Steve.Whitney@noaa.gov
by fax to	907-586-7557
or by mail to	Regional Administrator NMFS Alaska Region P.O. Box 21668 Juneau, AK 99802-1668

A copy of all reports must be retained, regardless of submittal method.

Annual Rockfish Cooperative Report

- Cooperative's CQ
- Any rockfish sideboard fishery harvests made by cooperative vessels on a vessel-by-vessel basis
- Actual retained and discarded catch of CQ
- Sideboard limit (if applicable) by statistical area and vessel-by-vessel basis
- Describe method used by the cooperative to monitor fisheries in which cooperative vessels participated
- Describe any actions taken by the cooperative in response to a member exceeding their catch as allowed under the rockfish cooperative agreement

Changed number of respondents from 6 to 9. Changed personnel costs from $25/hr to $37/hr.

Annual Rockfish Cooperative Report, Respondent	
Number of respondents	**9**
Total annual responses	**9**
Total annual time burden hours	**360 hr**
Time per response = 40 hr	
Total personnel cost ($37/hr x 360)	**$13,320**
Total miscellaneous cost (24.81)	**$25**
Attachment to email (0.05 x 3 = 0.15)	
Postage cost (1.47 x 3 = 4.41)	
Fax cost ($6 x 3 = 18)	
Photocopy cost (0.05 x5pp x 9 = 2.25)	

Annual Rockfish Cooperative Report, Federal Government	
Total annual responses	**9**
Total annual time burden hours	**45 hr**
Time per response = 5 hr	
Total personnel cost ($37/hr x 45)	**$1,665**
Total miscellaneous cost	**0**

e. C<u>ooperative check-in/check-out reports and declaration of fishing termination</u> [CHANGED]

The designated representative of a rockfish cooperative must designate any vessel that is authorized to fish under the rockfish cooperative's CQ permit before that vessel may fish under that CQ permit through a check-in procedure. The designated representative for a rockfish cooperative must submit to NMFS a **check-in report** for a vessel:

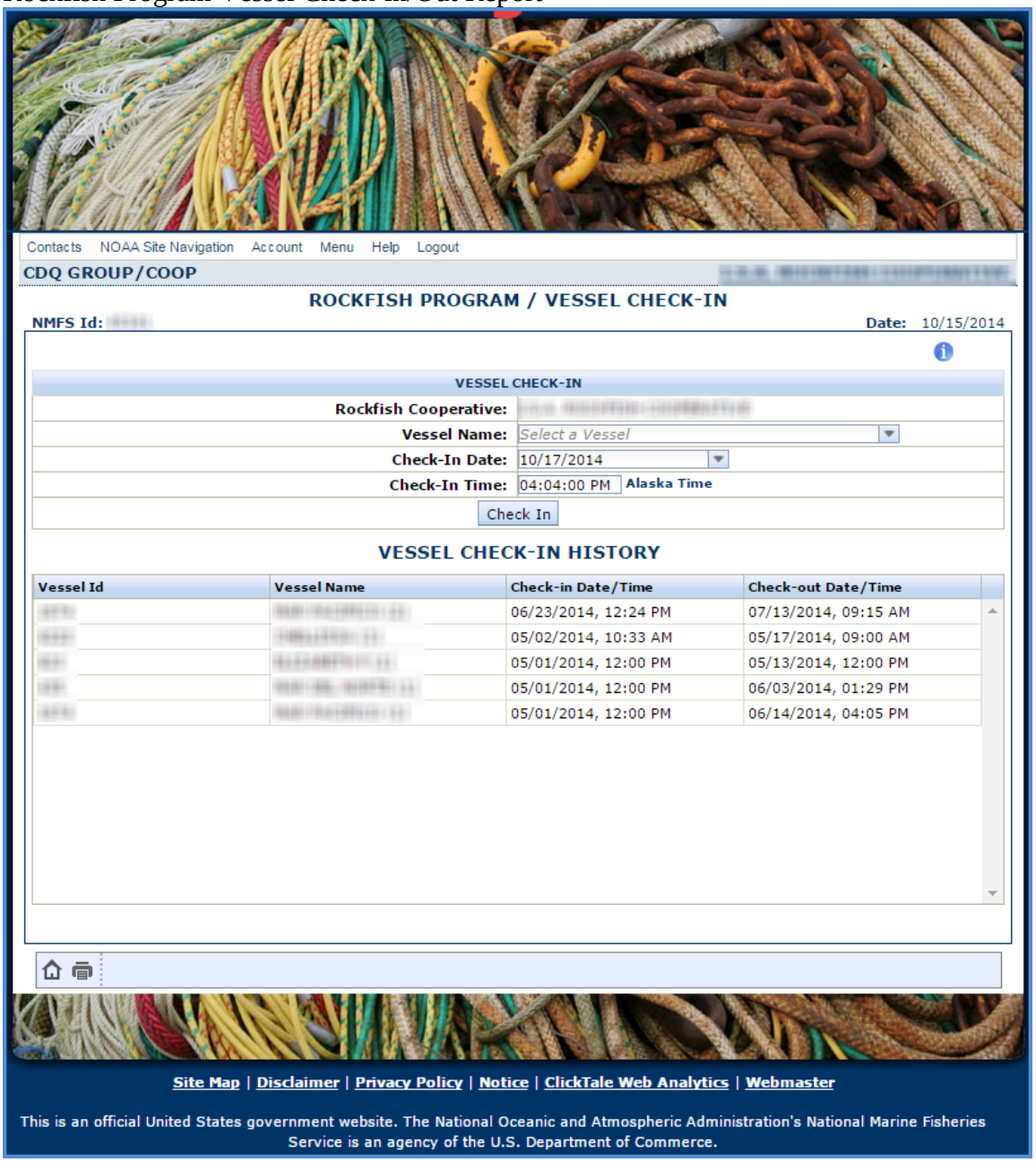
- At least 48 hours prior to the time the catcher vessel begins a fishing trip to fish under a CQ permit; or

- At least 1 hour prior to the time the catcher/processor begins a fishing trip to fish under a CQ permit; and

- A check-in designation is effective at the beginning of the first fishing trip after the designation has been submitted.

The designated representative of a rockfish cooperative must designate any vessel that is no longer fishing under a CQ permit for that rockfish cooperative through a check-out procedure.

Rockfish Program Vessel Check-in/Out Report



A **check-out report** must be submitted to NMFS within 6 hours after the effective date and time the rockfish cooperative ends the vessel's authority to fish under the CQ permit.

- If the vessel is fishing under a CQ permit for a catcher vessel cooperative, a check-out designation is effective at the end of a complete offload;

- If the vessel is fishing under a CQ permit for a catcher/processor cooperative, a check-out designation is effective upon submission to NMFS.

Termination of Fishing

A Rockfish cooperative may choose to terminate its CQ permit through a declaration submitted to NMFS. NMFS will review the declaration and notify the cooperative's authorized representative once the declaration has been approved.

The Check-in Report, Check-out Report, and Declaration of Termination of Fishing must be submitted to NMFS online through eFISH on the NMFS Alaska Region website at https://alaskafisheries.noaa.gov/webapps/efish/login. By using the NMFS ID password and submitting the transfer request, the designated representative certifies that all information is true, correct, and complete.

Electronic submittal of Check-in, Check-out, and Declaration of Termination of Fishing

Using eFISH, }
NMFS Person ID } Replaces Block A and Block B in online version
Transfer key }

Data Elements of Vessel Check-in/Check-out Report & Termination of Fishing Declaration

Block A -- Cooperative Information
- Name of Rockfish Cooperative
- NMFS Person ID
- CQ Permit Number
- Name of Cooperative Representative
- Signature of Representative
- Permanent Business Address
- Business Telephone Number, Business Fax Number, and Business E-mail Address

Block B – Vessel Information
- Name of Vessel
- USCG Designation Number
- FFP Number
- ADF&G Vessel Registration Number

Block C – Vessel Check-In or Check-Out Report
- Indicate whether this is a check-in or check-out report
- Date Effective
- Time Effective

Block D – Termination Of Fishing Declaration
- Date Declaration Submitted

NMFS estimates that each of the nine cooperatives sends 7 check-in/check-out reports each season. Changed number of respondents from 6 to 9. Personnel cost is changed from $25/hr to $37/hr to reflect current rates

Vessel Check-in/Check-out & Termination Report , Respondent	
Number of respondents	**9**
Total annual responses	**63**
Number responses per respondent = 7	
Total burden hours (10.5)	**11 hr**
Time per response = 10 min	
Total personnel cost ($37/hr x 11)	**$407**
Total miscellaneous costs (20.35)	**$20**
Must be online (0.05 x 407)	

There are no costs to the Federal Government, because the form is automatic and goes directly into the database.

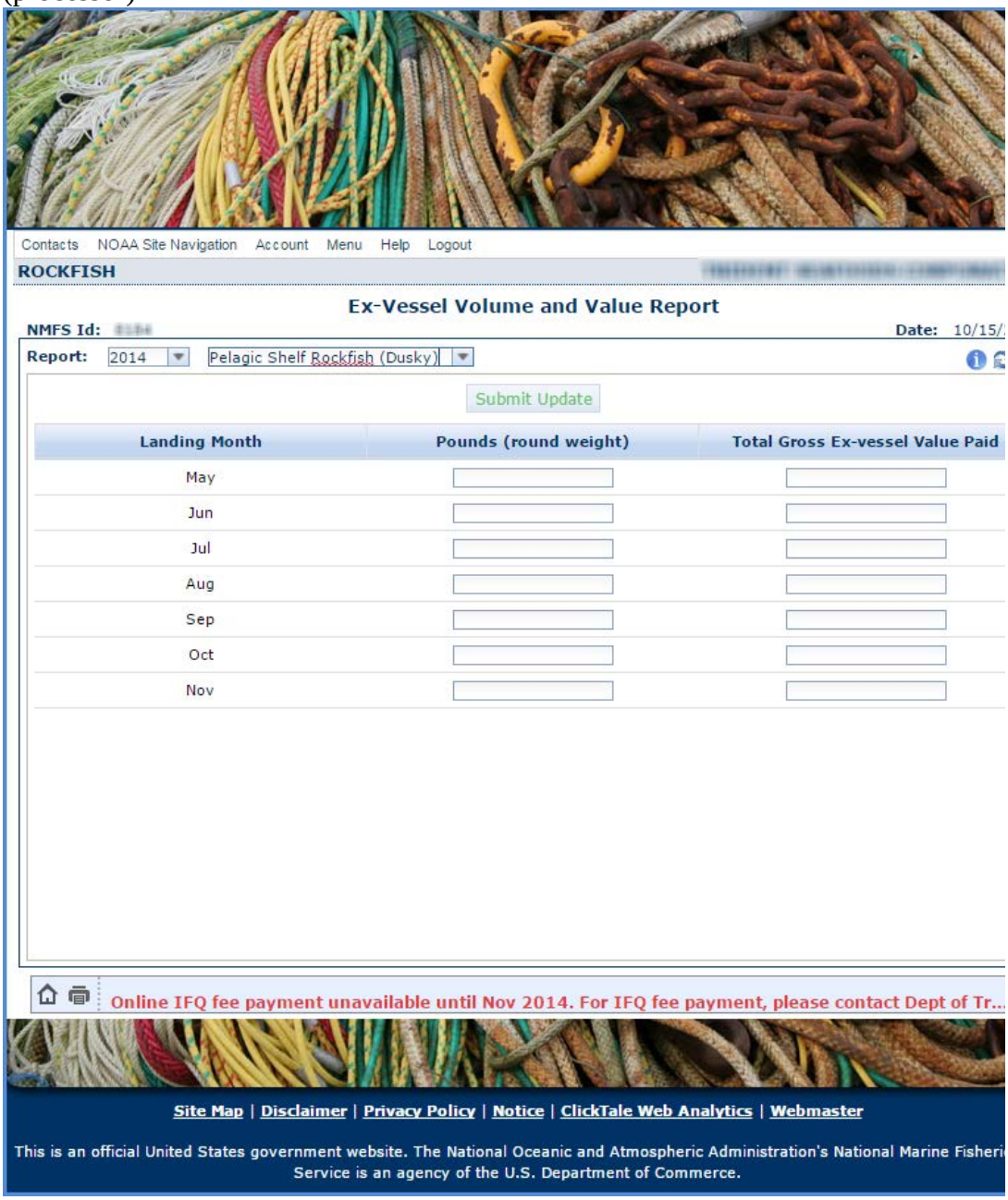
Vessel check-in/Check-out & Termination Report, Federal Government	
Total annual responses	**0**
Total burden hours	**0**
Total personnel cost	**0**
Total miscellaneous cost	**0**

g. Rockfish Ex-vessel Volume and Value Report [CHANGED]

A rockfish processor that receives and purchases landings of rockfish CQ groundfish must submit annually to NMFS a complete Rockfish Ex-vessel Volume and Value Report for each reporting period for which the rockfish processor receives rockfish CQ groundfish. The reporting period of the Rockfish Ex-vessel Volume and Value Report is from May 1 through November 15 of each year.

Deadline for submittal: not later than December 1 of the year in which the rockfish processor received the rockfish CQ groundfish.

Rockfish Program Ex-vessel Volume and Value Report
(processor)



The Ex-vessel Volume and Value Report must be submitted to NMFS online through eFISH on the NMFS Alaska Region website at https://alaskafisheries.noaa.gov/webapps/efish/login. By using the NMFS ID password and submitting the transfer request, the designated representative certifies that all information is true, correct, and complete.

Electronic submittal of Ex-vessel Volume & Value Report

Using eFISH, }
NMFS Person ID } Replaces Block A and Block B in online version
Transfer key }

Data Elements for Rockfish Ex-vessel Volume and Value Report

Indicate whether the Shoreside Processor received any rockfish during the current fishing year
If NO, stop. You are not required to submit this report

Block A – Rockfish Processor Identification

Name of Shoreside Processor
Federal Processor Permit number
NMFS Person ID
Business Mailing Address.
Indicate whether permanent or temporary
Port location
Business Telephone No.
Business Fax No.
Business E-mail Address

Block B – Certification

Printed Name and signature of processor and date signed
(if authorized representative, attach authorization)

Block C – Rockfish Program Pounds Purchased and Ex-vessel Value

For each time period, enter pounds (round weight) and total gross ex-vessel value paid for primary species and secondary species

Personnel cost is changed from $25/hr to $37/hr to reflect current rates

Rockfish Volume & Value Report , Respondent	
Number of respondents	**9**
Total annual responses	**9**
Number responses per respondent = 1	
Total burden hours (18)	**18 hr**
Time per response = 2 hours	
Total personnel cost ($37/hr x 18)	**$666**
Total miscellaneous costs (0.45)	**$1**
Must be online (0.05 x 9 = 0.45)	

There are no costs to the Federal Government, because the form is automatic and goes directly into the database.

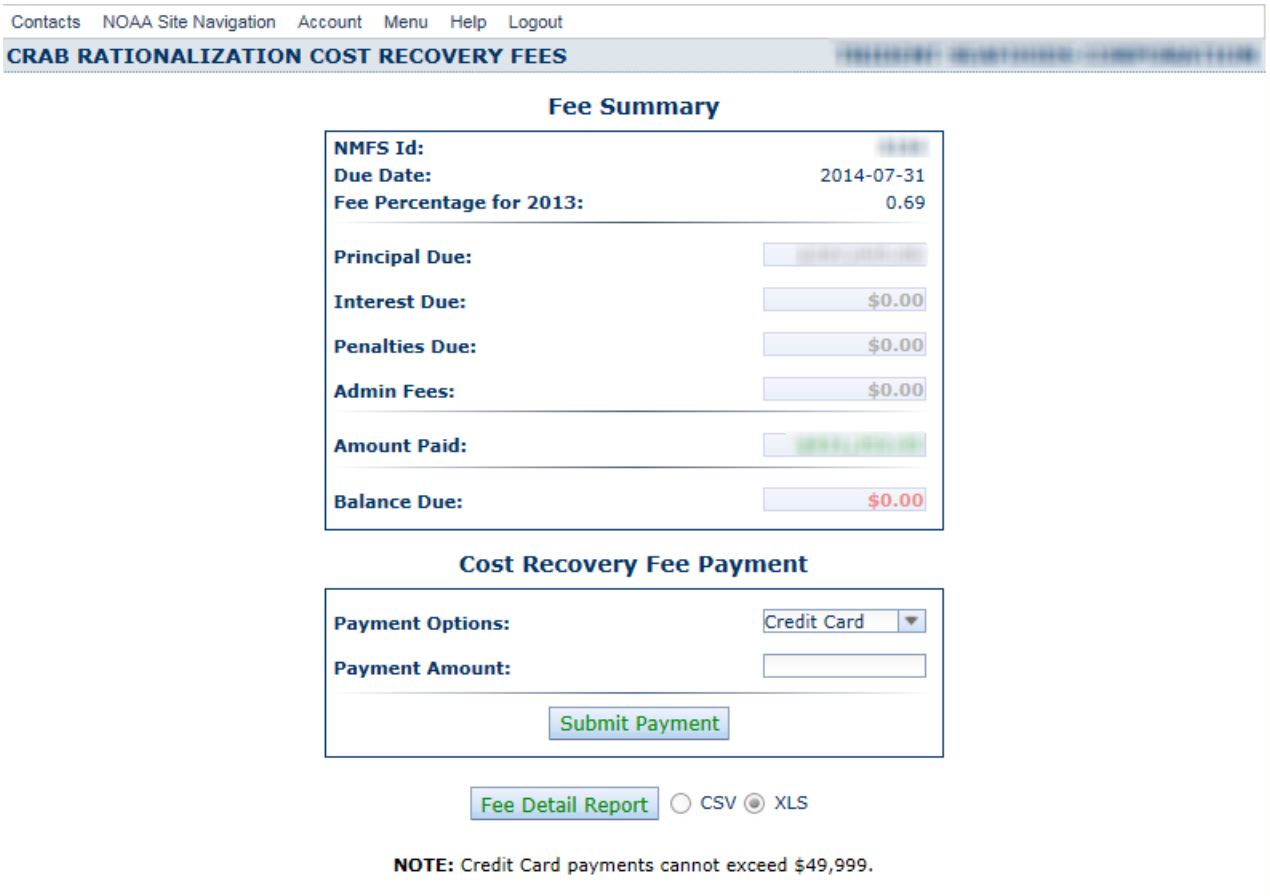
Rockfish Volume & Value Report, Federal Government	
Total annual responses	**0**
Total burden hours	**0**
Total personnel cost	**0**
Total miscellaneous cost	**0**

h. Rockfish Fee Payment [NEW]

All rockfish CQ holders who receive rockfish CQ must submit the cost recovery payment for all rockfish CQ landings made under the authority of their rockfish CQ permit.

A rockfish CQ permit holder must submit any rockfish cost recovery fee liability payment(s) to NMFS no later than February 15 of the year following the calendar year in which the rockfish CQ landings were made.

The Fee Payment must be submitted to NMFS online through eFISH on the NMFS Alaska Region website at https://alaskafisheries.noaa.gov/webapps/efish/login. By using the NMFS ID password and submitting the transfer key, the designated representative certifies that all information is true, correct, and complete.



Electronic submittal of Fee Payment

Using eFISH, }
NMFS Person ID } Replaces Block A and Block B in online version
Transfer key }

Rockfish Cooperative Quota Permit Fee Submission Form

Block A-- Overpayment

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

Apply Overpayment to Future Fee Liabilities
Issue Refund

Block B-- Identification of Rockfish Cooperative

Name of Cooperative
NMFS Person ID
Taxpayer ID (Employer ID No.)
Date of Incorporation

Business Mailing Address
Indicate whether Permanent or Temporary
Business Telephone No., Business Fax No., Business E-mail Address

Block C -- Agreement with Fee Liability Summary

Indicate whether agree with Fee Liability Summary
If YES, date and sign your name where designated in Block D
If NO, complete Block F (Fee Calculation) using the fee calculation instructions

Block D -- Signature

Printed Name and signature of Rockfish Cooperative Authorized Representative and date signed
If representative, **attach** authorization

Block E -- Method of Payment

Indicate whether Personal Check, Cashiers Check, Money Order made payable to NMFS
If paying for multiple permit holders, include their completed and signed Fee Submission Forms.
If paying by credit card
Name of card
Card number and Expiration Date
Amount of Payment
Name as Printed on Card
Signature of Card Holder and date signed

Changed personnel cost from $25/hr to $37/hr.

Rockfish Fee Payment , Respondent	
Number of respondents	**9**
Total annual responses	**9**
Number responses per respondent	
Total burden hours (1.50)	**2 hr**
Time per response = 10 minutes	
Total personnel cost ($37/hr x 2)	**$74**
Total miscellaneous costs (0.45)	**$1**
Must be online (0.05 x 9=0.45)	

Rockfish Fee Payment, Federal Government	
Total annual responses	**0**
Total burden hours	**0**
Total personnel cost	**0**
Total miscellaneous cost	**0**

i. Appeals [REMOVED]

Any person denied a rockfish permit was able to appeal to the Office of Administrative Appeals (OAA). The request for a rockfish permit Appeals is removed, because the permit application period has now expired.

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 response to 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.

Fee payment, the application for inter-cooperative transfer, ex-vessel volume and value report, and Check-in/check-out & termination of fishing reports must be submitted online.

Appeals and the annual rockfish cooperative report do not have a form. They may be submitted by mail, fax, or hand-delivery.

4. Describe efforts to identify duplication.

No duplication exists with other information collections.

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

The information collection 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.

If this information were not collected, NMFS could not fulfill the intent of Section 802 of the Consolidated Appropriations Act of 2004 and would reverse the impacts of the Rockfish Program achieved to date. The most notable effect of the Program is the substantial reduction in discards in the CGOA rockfish fisheries. In the years leading up to the Program, discards of Pacific ocean perch regularly exceeded 5 percent of total catch of the species. Discards of sablefish exceeded 100 metric tons in some years and exceeded 250 metric tons in one year. Under the Program, discards of these species are generally not permitted by cooperatives, reducing discards to near zero. Halibut mortality also dropped sharply, most notably in the catcher vessel sector, where halibut mortality dropped from between 25 and 50 pounds per ton of directed rockfish catch to less than 5 pounds per ton or rockfish catch. In addition to the conservation benefits from these discard and mortality reductions, the use of more pelagic gear in the fishery has provided habitat benefits.

Shoreside processors that qualified for the Program have clearly benefited from the cooperative associations that have facilitated their coordination of deliveries. The redistribution of rockfish deliveries away from times of peak salmon processing has reduced pressure on plant processing crews. Quality of landings is said to have improved because scheduling has reduced the time that catcher vessels must wait to offload.

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

No inconsistencies occur in this collection.

8. Provide 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.

Public comment was solicited in a Federal Register Notice published July 30, 2014 (79 FR 44160). No comments were received.

In addition, NMFS AKR sent out a questionnaire to all of the Rockfish Program participants soliciting comments. NMFS received one comment; however, that respondent represents 7 cooperatives. The comments received are summarized below.

SURVEY SUMMARY

WHAT DO YOU THINK ABOUT THE
ALASKA ROCKFISH PROGRAM: PERMITS AND REPORTS COLLECTION?
OMB CONTROL NO. 0648-0545

November, 2014

Application for Rockfish Cooperative Fishing Quota (CQ)	**1 response**	
1. Is the data requested easily available?	Yes	Requires members to notify us of change of ownership so not always easy
2. Is this process easy to understand and to apply for?	Yes	
3. We estimate it takes 2 hours for your office personnel to complete this application. Is this time accurate and reasonable?	Yes	2 hours per co-op (7 co-ops)
4. We estimate that personnel costs to complete and submit the application are $37/hour. Is this cost accurate and reasonable?	Yes	
5. Does someone other than your office personnel complete the application?	No	
6. We estimate that miscellaneous costs include $7 to submit by mail or fax and $1 to copy the application. Do you agree?	Yes	
7. Do you agree with the frequency of collection, which required annually.	Yes	
8. Are the instructions for completion of the application clear?	Yes	
9. Do you agree with the reporting format, which is a form?	Yes	
10. Are the required data elements reasonable and necessary?	Yes	
11. Do you believe that this application has practical utility?	Yes	
12. Do you have suggested ways to enhance the quality and clarity of the information to be collected?		No comment
13. Do you have suggestions to minimize the burden of completing this application?	Yes	COMMENT: Online application rather than by fax RESPONSE: NMFS continues to work on making forms available online. However, this application requires many attachments and is not suitable for online submittal.
14. Please provide any additional comments on any aspect of the Rockfish Program.		No comment

Application for Inter-Cooperative Transfer of CQ		**1 response**
1. Is the data requested easily available?	Yes	
2. Is this process easy to understand?	Yes	
3. We estimate it takes 30 minutes for your office personnel to complete this report. Is this time accurate and reasonable?	No	COMMENT: 5-10 minutes for online transfer RESPONSE: For the next support statement, NMFS will adjust down from 30 minutes to 10 minutes for this online transfer
4. We estimate that personnel costs to complete and submit the report are $37/hour. Is this cost accurate and reasonable?	Yes	
5. Does someone other than your office personnel complete the report?	No	
6. We estimate that it costs $2 to submit the report online. Do you agree?	No	
7. Do you agree with the frequency of collection, which is annual?	No	COMMENT: Transfers are made throughout the season (occasional) RESPONSE: the respondent is correcting an error on the survey
8. Are the instructions for completion of the application clear?	Yes	
9. Do you agree with the reporting format, which is online?	Yes	Much preferred to previous paper transfers
10. Are the required data elements reasonable and necessary?	Yes	
11. Do you believe that this application has practical utility?	Yes	
12. Do you have suggested ways to enhance the quality and clarity of the information to be collected?	No	
13. Do you have suggestions to minimize the burden of completing this application?	No	Very easy now
14. Please provide any additional comments on any aspect of the Rockfish Program.		COMMENT: Amount of primary RF CQ available per member is difficult to understand. Old members not removed from drop down list with sale of LLP RESPONSE: A discussion with project managers and programmers concluded that to make this change, programming is involved and a thorough review must be made of how this change might affect other data elements. When the review is complete and no negative consequences occur, the change will be made – sometime this year.

Annual Rockfish Cooperative Report		**1 response**
1. Is the data requested easily available?	Yes	
2. Is this process easy to understand and to apply for?	Yes	
3. We estimate it takes 40 hours for your office personnel to complete this report. Is this time accurate and reasonable?	Yes	COMMENT: For 7 co-op reports, yes RESPONSE: It is not clear whether respondent means that all 7 coop reports can be done in 40 hr vs NMFS view that each report takes 40 hr
4. We estimate that personnel costs to complete and submit the report are $37/hour. Is this cost accurate and reasonable?	Yes	
5. Does someone other than your office personnel complete the report?	No	
6. We estimate that it costs $8 to submit the report by electronic file, fax, or mail, and $1 to copy the report. Do you agree?	Yes	COMMENT: Respondent wrote down the regulation for this form. (A) The annual rockfish cooperative report must be submitted to the Regional Administrator by an electronic data file in a NMFS-approved format by fax: 907-586-7557; or by mail to the Regional Administrator, NMFS Alaska Region, P.O. Box 21668, Juneau, AK 99802-1668 And then said, Yes. We usually mail the reports, but would rather submit by email. Not clear if email is acceptable or what email address to use. RESPONSE: e-mail is an acceptable method for submittal as indicated by the regulation quote above. A separate email address is being created and will be available soon. Until then, the reports may be sent by E-mail to Steve.Whitney@noaa.gov.
7. Do you agree with the frequency of collection, which is annual?	Yes	
8. Are the instructions for completion of the report clear?	Yes	
9. Do you agree with the reporting format, which is narrative form rather than completion of a form?	Yes	
10. Are the required data elements reasonable and necessary?	Yes	
11. Do you believe that this report has practical utility?	Yes	
12. Do you have suggested ways to enhance the quality and clarity of the information to be collected?	No	
13. Do you have suggestions to minimize the burden of completing this report?	No	
14. Please provide any additional comments on any aspect of the Rockfish Program.		No comment

Cooperative check-in/check-out reports and declaration of fishing termination		**1 response**
1. Is the data requested easily available?	Yes	
2. Is this process easy to understand ?	Yes	
3. We estimate it takes 10 minutes for your office personnel to complete this report. Is this time accurate and reasonable?	Yes	
4. We estimate that personnel costs to complete and submit the report are $37/hour. Is this cost accurate and reasonable?	Yes	
5. Does someone other than your office personnel complete the report?	No	
6. Do you agree with the frequency of collection, which is annual or occasional?	Yes	
7. Are the instructions for completion of the report clear?	Yes	
8. Do you agree with the reporting format, which is online?	Yes	Online much preferred
9. Are the required data elements reasonable and necessary?	Yes	
10. Do you believe that this report has practical utility?	Yes	
11. Do you have suggested ways to enhance the quality and clarity of the information to be collected?	No	
12. Do you have suggestions to minimize the burden of completing this report?		No burden
13. Please provide any additional comments on any aspect of the Rockfish Program.		COMMENT: We believe 24 hour check in is sufficient. Two day wait time is sometimes inconvenient for co-op vessels RESPONSE: It is not possible for NMFS to change the submittal time for this report, without a change to the 679 regulations. The regulations cannot be changed without analysis, and an analysis must be scheduled in with other changes to the regulations. NMFS will consider this for possible revision.

Rockfish Ex-vessel Volume and Value Report		**1 response**
1. Is the data requested easily available?	Yes	Only through elandings
2. Is this process easy to understand ?	Yes	
3. We estimate it takes 2 hours for your office personnel to complete this report. Is this time accurate and reasonable?	No	COMMENT: By species and month, 3 hours per co-op better estimate RESPONSE: This change requires a regulation change to change content of this question. As it happens, a separate rule dealing with cost recovery is in progress. This rule will remove this form and incorporate the questions into an online report which is estimated to take minutes to complete, rather than hours.
4. We estimate that personnel costs to complete and submit the report are $37/hour. Is this cost accurate and reasonable?		Unknown
5. Does someone other than your office personnel complete the report?	Yes	Data compiled and reports submitted by the processors, though we help data check
6. We estimate that it costs 50 cents to submit the report online. Do you agree?	No	AGDB does not submit the reports
7. Do you agree with the frequency of collection, which is annual?	Yes	
8. Are the instructions for completion of the report clear?	Yes	
9. Do you agree with the reporting format, which is online?	Yes	
10. Are the required data elements reasonable and necessary?	No	COMMENT: Wonder if values by month are really necessary – don't think the price changes that much RESPONSE: See the response to Question 3. This form will be incorporated into an online form.
11. Do you believe that this report has practical utility?	Yes	
12. Do you have suggested ways to enhance the quality and clarity of the information to be collected?	No	
13. Do you have suggestions to minimize the burden of completing this report?	No	
14. Please provide any additional comments on any aspect of the Rockfish Program.		

Rockfish Fee Payment	1 response
1. Is the data requested easily available?	Yes
2. Is this process easy to understand ?	Yes
3. We estimate it takes 10 minutes for your office personnel to complete this payment. Is this time accurate and reasonable?	Yes
4. We estimate that personnel costs to complete and submit the feet are $37/hr. Is this cost accurate and reasonable?	Yes
5. Does someone other than your office personnel complete the fee?	No
6. We estimate that it costs 50 cents to submit the fee online. Do you agree?	Yes
7. Do you agree with the frequency of collection, which is annual?	Yes
8. Are the instructions for submittal of the fee clear?	Yes
9. Do you agree with the reporting format, which is online?	Yes
10. Are the required data elements reasonable and necessary?	Yes
11. Do you believe that this fee has practical utility?	Yes
12. Do you have suggested ways to enhance the quality and clarity of the information to be collected?	No comment
13. Do you have suggestions to minimize the burden of submitting this fee?	No comment
14. Please provide any additional comments on any aspect of the Rockfish Program.	No comment

Appeals	1 response
No appeals submitted to date	

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

No payment or gift is provided.

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.

All information collected is part of a system of records: NOAA #19, Permits and Registrations for United States Federally Regulated Fisheries.

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.

Not Applicable.

12. <u>Provide an estimate in hours of the burden of the collection of information</u>.

Estimated total unique respondents, 9, down from 55. Estimated total responses, 126, down from 513. Estimated total burden, 414, down from 490 hr. Estimated total personnel cost, $15,318, up from $12,250.

13. <u>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)</u>.

Estimated total miscellaneous costs $74, down from $353.

14. <u>Provide estimates of annualized cost to the Federal government</u>.

Estimated total responses: 18, down from 513. Estimated total burden, 50 hr, down from 186 hr. Estimated total personnel cost, $1,850, down from $6,525.

15. <u>Explain the reasons for any program changes or adjustments</u>.

Adjustments are made in this collection, due in part to differences in numbers of participants, based on current permit counts, and due to revisions to postage rates and online costs.

<u>Application for rockfish cooperative quota (CQ)</u>

an increase of 3 respondents and responses, 9 instead of 6
an increase of 6 hr burden, 18 instead of 12 hr
an increase of $366 personnel costs, $666 instead of $300
a decrease of $196 miscellaneous costs, $26 instead of $222

<u>Application for rockfish inter-cooperative transfer</u>

an increase of 3 respondents, 9 instead of 6
an increase of 9 responses, 27 instead of 18
a decrease of 13 hr burden, 5 instead of 18 hr
an increase of $265 personnel costs, $185 instead of $450
a decrease of $2 miscellaneous costs, $1 instead of $3

<u>Annual Rockfish Cooperative Report</u>

an increase of 3 respondents and responses, 9 instead of 6
an increase of 120 hr burden, 360 instead of 240 hr
an increase of $7,320 personnel costs, $13,320 instead of $6,000
an increase of $17 miscellaneous costs, $25 instead of $8

<u>Vessel Check-in/check-out & declaration of termination fishing</u> – correction, previously total responses were shown as response per respondent

an increase of 3 respondents, 9 instead of 6
a decrease of 345 responses, 63 instead of 408

an increase of 57 hr burden, 11 instead of 68 hr
a decrease of $1,293 personnel costs, $407 instead of $1,700
a decrease of $21 miscellaneous costs, $20 instead of $41

Ex-vessel and volume report
an increase of 3 respondents and responses, 9 instead of 6
an increase of 6 hr burden, 18 instead of 12 hr
an increase of $366 personnel costs, $666 instead of $300

Program Changes

Fee submittal
an increase of 9 respondents and responses, 9 instead of 0
an increase of 2 hr burden, 2 instead of 0 hr
an increase of $74 personnel costs, $74 instead of 0
an increase of $1 miscellaneous costs, $1 instead of 0

Appeals [REMOVED]
a decrease of 9 respondents and responses, 0 instead of 1
a decrease of 4 hr burden, 0 instead of 4 hr
a decrease of $100 personnel costs, 0 instead of $100
a decrease of $1 miscellaneous costs, 0 instead of $1

Application for Rockfish cooperative quota share (QS) [REMOVED]
a decrease of 68 respondents and responses, 0 instead of 68
a decrease of 136 hr burden, 0 instead of 136 hr
a decrease of $3,400 personnel costs, 0 instead of $3,400
a decrease of $77 miscellaneous costs, 0 instead of $77

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

The information collected will not be published.

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

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 Rockfish Cooperative Fishing Quota (CQ)

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 / (907) 586-7202 in Juneau
(907) 586-7354 fax

This application must be submitted annually by each Rockfish Cooperative and received by NMFS **by March 1st**

- ♦ A Rockfish Cooperative that submits a complete application that NMFS approves will receive a CQ permit.
- ♦ The CQ permit will establish an annual amount of primary rockfish species, secondary species, and rockfish halibut prohibited species catch (PSC) based on the collective rockfish quota share (QS) of the License Limitation Program (LLP) licenses assigned to the rockfish cooperative by its members.
- ♦ A CQ permit will list the amount of CQ, by fishery, held by the Rockfish Cooperative, the members of the Rockfish Cooperative, LLP licenses assigned to that rockfish cooperative, and the vessels that are authorized to harvest fish under that CQ permit.

ATTACHMENTS

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

- ♦ A copy of the business license issued by the state where the Rockfish Cooperative is registered as a business entity
- ♦ A copy of the articles of incorporation or partnership agreement of the Rockfish Cooperative;
- ♦ A copy of the Rockfish Cooperative agreement signed by the members of the Rockfish Cooperative (if different from the articles of incorporation or partnership agreement of the Rockfish Cooperative)
- ♦ A copy of proposed fishing plan

NOTE: The articles of incorporation or cooperative agreement must specify that

- ♦ the Rockfish QS holders affiliated with Rockfish processors cannot participate in price setting negotiations, except as permitted by general antitrust law
- ♦ the Rockfish Cooperative has a monitoring program sufficient to ensure compliance with the Rockfish Program

BLOCK A – ROCKFISH COOPERATIVE IDENTIFICATION

1. Rockfish Cooperative's Legal Name:	2. NMFS Person ID:

3. Type of business entity under which the cooperative is organized:

[__] Cooperative [__] Partnership [__] Other (Please specify)

4. Date of Incorporation:	5. State in which the cooperative is legally registered as a business entity:	6. Name of Authorized Representative:

7. Permanent Business Address:		
8. Business Telephone Number:	9. Business Fax Number:	10. E-mail Address:

BLOCK B – MEMBERS OF THE ROCKFISH COOPERATIVE ***LLP Holder and Ownership Documentation***	
1. Full Name:	2. NMFS Person ID: 3. LLP Number(s):
Enter the names of all persons, to the individual level, holding an ownership interest in the LLP license(s) assigned to the rockfish cooperative and the percent of ownership each person and individual holds in the LLP license(s).	
Name	% Ownership in LLP License

LLP Holder and Ownership Documentation	
1. Full Name:	2. NMFS Person ID: 3. LLP Number(s):
Enter the names of all persons, to the individual level, holding an ownership interest in the LLP license(s) listed above and the percentage ownership each person and individual holds in the LLP license(s). Attach additional pages as necessary.	
Name	% Ownership in LLP License

LLP Holder and Ownership Documentation	
1. Full Name:	2. NMFS Person ID:
	3. LLP Number(s):

Enter the names of all persons, to the individual level, holding an ownership interest in the LLP license(s) listed above and the percentage ownership each person and individual holds in the LLP license(s). Attach additional pages as necessary.

Name	% Ownership in LLP License

LLP Holder and Ownership Documentation	
1. Full Name:	2. NMFS Person ID:
	3. LLP Number(s):

Enter the names of all persons, to the individual level, holding an ownership interest in the LLP license(s) listed above and the percentage ownership each person and individual holds in the LLP license(s). Attach additional pages as necessary.

Name	% Ownership in LLP License

LLP Holder and Ownership Documentation	
1. Full Name	2. NMFS Person ID:
	3. LLP Number(s):

Enter the names of all persons, to the individual level, holding an ownership interest in the LLP license(s) listed above and the percentage ownership each person and individual holds in the LLP license(s). Attach additional pages as necessary.

Name	% Ownership in LLP License

BLOCK C -- IDENTIFICATION OF ROCKFISH COOPERATIVE MEMBER VESSELS		
Vessel Name	ADF&G Number:	USCG Number:
Vessel Name	ADF&G Number:	USCG Number:
Vessel Name	ADF&G Number:	USCG Number:
Vessel Name	ADF&G Number:	USCG Number:
Vessel Name	ADF&G Number:	USCG Number:
Vessel Name	ADF&G Number:	USCG Number:
Vessel Name	ADF&G Number:	USCG Number:
Vessel Name	ADF&G Number:	USCG Number:
Vessel Name	ADF&G Number:	USCG Number:
Vessel Name	ADF&G Number:	USCG Number:
Vessel Name	ADF&G Number:	USCG Number:
Vessel Name	ADF&G Number:	USCG Number:
Vessel Name	ADF&G Number:	USCG Number:
Vessel Name	ADF&G Number:	USCG Number:
Vessel Name	ADF&G Number:	USCG Number:

BLOCK D – SHORESIDE PROCESSOR ASSOCIATE OF THE ROCKFISH COOPERATIVE	
1. Processor Name:	2. NMFS Person ID:
3. Facility Name:	4. ADF&G Processor Code:
	5. Federal Processor Permit Number:

BLOCK E - CERTIFICATION OF COOPERATIVE AUTHORIZED REPRESENTATIVE	
Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information is true, correct, and complete.	
1. Signature of Cooperative Authorized Representative:	2. Date Signed:
3. Printed Name of Cooperative Authorized Representative *(attach authorization)*:	

BLOCK F - CERTIFICATION OF PROCESSOR ASSOCIAATE	
Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information is true, correct, and complete.	
1. Signature of Shoreside Processor Authorized Representative:	2. Date Signed:
3. Printed Name of Shoreside Processor Authorized Representative *(attach authorization)*:	

PUBLIC REPORTING BURDEN STATEMENT

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

ADDITIONAL INFORMATION

Before completing this form, please note the following: 1) Notwithstanding any other provision of law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number; 2) This information is mandatory and is required to manage commercial fishing efforts under 50 CFR part 679 and under section 402(a) of the Magnuson-Stevens Act (16 U.S.C. 1801, *et seq.*); 3) Responses to this information request are confidential under section 402(b) of the Magnuson-Stevens Act as amended in 2006. They are also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics.

Catcher vessel sector: Those rockfish eligible harvesters, who hold an LLP license without a catcher/processor designation with at least one rockfish legal landing that could, or does, generate rockfish quota share (QS). Catcher vessels may form a cooperative with other catcher vessels with an association with any shoreside processor located within the geographic boundaries of the City of Kodiak. No minimum number of License Limitation Program (LLP) licenses is required.

Catcher/processor sector: Those rockfish eligible harvesters, who hold an LLP license with a catcher/processor designation that is assigned at least one rockfish legal landing that could, or does, generate rockfish QS. Catcher/processors may form a cooperative with other catcher/processors. No minimum number of LLP licenses required.

Rockfish Program Species of the Central Gulf of Alaska	
Rockfish Primary Species	Rockfish Secondary Species
Northern rockfish	Sablefish not allocated to the IFQ Program
Pacific Ocean perch	Thornyhead rockfish
Pelagic Shelf rockfish	Pacific cod for catcher vessel sector
	Rougheye rockfish for the catcher/processor sector
	Shortraker rockfish for the catcher/processor sector

A Rockfish CQ permit is valid only until the end of the calendar year for which the CQ permit is issued.

Fishing by vessels participating in a rockfish cooperative is authorized from 1200 hours, A.l.t., May 1 through 1200 hours, A.l.t., November 15.

GENERAL INFORMATION

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.

Application forms are available on the NMFS Alaska Region website
at http://alaskafisheries.noaa.gov/sustainablefisheries/rockfish/
or by contacting NMFS at 800–304–4846, Option 2.

A completed application must be received by NMFS no later than 1700 hours, A.l.t., March 1 or if sent by U.S. mail, the application must be postmarked by that time. For applications delivered by hand delivery or carrier only, the receiving date of signature by NMFS staff is the date the application was received. If the application is submitted by fax, the receiving date of the application is the date stamped received by NMFS.

Objective written evidence of timely application will be considered as proof of a timely application.

This application may only be submitted to NMFS using the methods described below. Type or print legibly in ink; retain a copy of completed application for your records.

Complete application and submit:

by mail to:	NMFS Alaska Region Restricted Access Management (RAM) P.O. Box 21668 Juneau, AK 99802-1668
by delivery to:	Room 713, Federal Building 709 West 9th Street Juneau, AK
by fax to:	(907) 586-7354

If you need additional information, contact RAM at:

(800) 304-4846 (Option #2) or

(907) 586-7202 (Option #2)

Print information in the application legibly in ink or type information.

Retain a copy of completed application for your records.

COMPLETING THE APPLICATION

ATTACHMENTS

The following documents must be attached to the completed application:

- A copy of the business license issued by the state in which the Cooperative is registered as a business entity
- A copy of the articles of incorporation or partnership agreement of the Rockfish Cooperative
- A copy of the cooperative agreement signed by the members of the Rockfish Cooperative.

  The Cooperative Agreement
  - □ must include specific monitoring procedures
  - □ may include any voluntary codes of conduct that apply to the members of the cooperative
  - □ may specify the obligations of rockfish cooperative members to ensure the full payment of rockfish cost recovery fees that may be due.

NOTE: The articles of incorporation or cooperative agreement submitted by the Rockfish Cooperative must specify that the eligible processor does not participate in price setting negotiations except to the extent permitted by general antitrust law.

BLOCK A – ROCKFISH COOPERATIVE IDENTIFICATION

1. Rockfish cooperative's legal name
2. NMFS Person ID
3. Type of business entity under which organized
4. Date of Incorporation
5. State in which legally registered as a business entity
6. Name of the authorized representative
7. Permanent business address, including P.O. Box number or street address, city, state, and zip code

8-9. Business telephone number and fax number, including area code

10. Business e-mail address

BLOCK B – MEMBERS OF ROCKFISH COOPERATIVE *(LLP Holder and Ownership Documentation)*

(Copy this page to accommodate additional coop members)

1. Full name of member
2. NMFS Person ID
3. LLP license number(s)
4. List all persons, to the individual level, holding an ownership interest in the LLP(s) assigned to the rockfish cooperative and the percent of ownership each person and individual holds in the LLP license(s).

BLOCK C -- IDENTIFICATION OF ROCKFISH COOPERATIVE MEMBER VESSELS

Provide a list of any vessels that may be used by the cooperative to harvest CQ during the year for which CQ is applied. This list may not be modified during the year for which the CQ permit is issued. For each vessel provide:

Vessel name
Alaska Department of Fish and Game (ADF&G) vessel registration number
U.S. Coast Guard (USCG) documentation number

BLOCK D – SHORESIDE PROCESSOR ASSOCIATE OF THE ROCKFISH COOPERATIVE

1. Processor name
2. NMFS Person ID
3. Facility name
4. ADF&G processor code
5. Federal processor permit (FPP) number

BLOCK E – CERTIFICATION OF COOPERATIVE

The Rockfish Cooperative's authorized representative must enter printed name, sign, and date the application certifying that all information is true, correct, and complete to the best of his/her knowledge and belief.

BLOCK F – CERTIFICATION OF PROCESSOR ASSOCIATE

The Processor Associate's authorized representative must enter printed name, sign, and date the application certifying that all information is true, correct, and complete to the best of his/her knowledge and belief.

Application for Inter-Cooperative Transfer of Rockfish Cooperative Quota (CQ)

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 / (907) 586-7202 in Juneau
(907) 586-7354 fax

Application must be submitted online at: https://alaskafisheries.noaa.gov/webapps/efish/login

BLOCK A -- IDENTIFICATION OF TRANSFEROR Applicant must be a U.S. corporation, partnership, association, or other non-individual business entity.		
1. Name of Rockfish Transferor		2. NMFS person ID
3. Name of authorized representative		
4. Permanent business mailing address	5. Temporary business mailing address (if applicable)	
6. Business telephone No.	7. Business fax No.	8. E-mail address

BLOCK B -- IDENTIFICATION OF TRANSFEROR'S ELIGIBLE ROCKFISH PROCESSOR		
1. Name of Transferor's Processor		2. NMFS person ID
3. Name of designated representative		
4. Permanent business mailing address	5. Temporary business mailing address *(if applicable)*	
6. Business telephone number	7. Business Fax number	8. E-mail address

BLOCK C -- IDENTIFICATION OF TRANSFEREE		
1. Name of Rockfish Transferee		2. NMFS person ID
3. Name of authorized representative		
4. Permanent business mailing address	5. Temporary business mailing address *(if applicable)*	
6. Business telephone No.	7. Business fax No.	8. E-mail address

BLOCK D -- IDENTIFICATION OF TRANSFEREE'S ELIGIBLE ROCKFISH PROCESSOR		
1. Name of Transferee's Processor		2. NMFS person ID
3. Name of designated representative		
4. Permanent business mailing address	5. Temporary business mailing address (if applicable)	
6. Business telephone number	7. Business Fax number	8. E-mail address

BLOCK E[1] – IDENTIFICATION OF ROCKFISH COOPERATIVE QUOTA (CQ) TO BE TRANSFERRED (LEASE) TO COOPERATIVE MEMBER(S) ***(To Be Completed By Transferor)***		
Identify the type and amount of Primary Species, Secondary Species, or Rockfish Halibut PSC CQ to be transferred. Distribute the CQ identified in Block E[1] to cooperative members in Block E[2]. **Duplicate this page** as necessary.		
Type of CQ (Primary, Secondary, Halibut PSC)	Species to be Transferred	Amount (in mt)

BLOCK E[2] – IDENTIFICATION OF ROCKFISH COOPERATIVE MEMBER(S) ***(To Be Completed By Transferee)***			
A rockfish cooperative receiving primary rockfish species CQ by transfer must assign that primary rockfish species CQ to a member of the rockfish cooperative for purposes of applying the use caps established under § 679.82(a). **Duplicate this page** as necessary.			
1. Name of Qualifying Member (print):	NMFS Person ID:	Species:	Amount of CQ:
2. Name of Qualifying Member (print):	NMFS Person ID:	Species:	Amount of CQ:
3. Name of Qualifying Member (print):	NMFS Person ID:	Species:	Amount of CQ:
4. Name of Qualifying Member (print):	NMFS Person ID:	Species:	Amount of CQ:
5. Name of Qualifying Member (print):	NMFS Person ID:	Species:	Amount of CQ:
6. Name of Qualifying Member (print):	NMFS Person ID:	Species:	Amount of CQ:

BLOCK F[1] -- CERTIFICATION OF TRANSFEROR	
Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information is true, correct, and complete.	
1. Signature of Transferor's Designated Representative	2. Date
3. Printed Name of Transferor's Designated Representative; **attach** authorization	

BLOCK F[2] -- CERTIFICATION OF TRANSFEROR'S PROCESSOR	
Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information is true, correct, and complete.	
1. Signature of Eligible Rockfish Processor (associated with Cooperative)	2. Date
3. Printed Name of Eligible Rockfish Processor	

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

BLOCK G[2] -- CERTIFICATION OF TRANSFEREE'S PROCESSOR	
Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information is true, correct, and complete.	
1. Signature of Eligible Rockfish Processor (associated with Cooperative)	2. Date
3. Printed Name of Eligible Rockfish Processor	

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing the instructions, searching the existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Assistant Regional Administrator, Sustainable Fisheries Division, NOAA National Marine Fisheries Service, P.O. Box 21668, Juneau, AK 99802-1668.

ADDITIONAL INFORMATION

Before completing this form, please note the following: 1) Notwithstanding any other provision of law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number; 2) This information is mandatory and is required to manage commercial fishing efforts under 50 CFR part 679 and under section 402(a) of the Magnuson-Stevens Act (16 U.S.C. 1801, *et seq.*); 3) Responses to this information request are confidential under section 402(b) of the Magnuson-Stevens Act as amended in 2006. They are also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics.

INSTRUCTIONS
Application for Inter-Cooperative Transfer
Rockfish Fishery

Application must be submitted online at: https://alaskafisheries.noaa.gov/webapps/efish/login

GENERAL INFORMATION

In order for an inter-cooperative transfer to be approved, both parties must be already established and recognized by NMFS as a cooperative.

A Rockfish Cooperative may transfer all or part of its CQ to another Rockfish Cooperative. This transfer requires the submission of an Application for Inter-Cooperative Transfer to NMFS. Once NMFS issues an annual catch amount to a cooperative, it may be fished by members of the cooperative or transferred to another cooperative. However, a cooperative in the catcher vessel sector may not transfer an annual catch amount to a cooperative in the catcher/processor sector.

Transfer of an annual catch amount is only valid during the calendar year of the transfer.

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

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

BLOCK A -- IDENTIFICATION OF TRANSFEROR (BUYER*)*.

1. Name and NMFS Person ID
2. Name of authorized representative

3-4. Permanent business mailing address, including P.O.Box or street address, city, state, and zip code
A temporary mailing address may be included (if applicable)

5-6. Business telephone number and business fax number, including area codes.

7. Business e-mail address

BLOCK B -- IDENTIFICATION OF TRANSFEROR'S ELIGIBLE ROCKFISH PROCESSOR.

1. Name and NMFS Person ID
2. Name of authorized representative

3-4. Permanent business mailing address, including P.O.Box or street address, city, state, and zip code
A temporary mailing address may be included (if applicable)

5-6. Business telephone number and business fax number, including area codes.

7. Business e-mail address

BLOCK C -- IDENTIFICATION OF TRANSFEREE (SELLER*)*

1. Name and NMFS Person ID
2. Name of designated representative

3-4. Permanent business mailing address, including P.O.Box or street address, city, state, and zip code
A temporary mailing address may be included (if applicable)

5-6. Business telephone number and business fax number, including area codes

7. Business e-mail address

BLOCK D -- IDENTIFICATION OF TRANSFEREE'S ELIGIBLE ROCKFISH PROCESSOR.

1. Name and NMFS Person ID
2. Name of authorized representative

3-4. Permanent business mailing address, including P.O.Box or street address, city, state, and zip code
A temporary mailing address may be included (if applicable)

5-6. Business telephone number and business fax number, including area codes.

7. Business e-mail address

BLOCK E^1 – IDENTIFICATION OF ROCKFISH COOPERATIVE QUOTA (CQ) TO BE TRANSFERRED (LEASE) TO COOPERATIVE MEMBER(S)
(To Be Completed By Transferor)

Identify the type of CQ (Primary, Secondary, Halibut PSC), species to be transferred, and amount of transfer (in metric tons) Distribute the CQ identified in Block E^1 to cooperative members in Block E^2. Duplicate this page as necessary.

BLOCK E^2 – IDENTIFICATION OF ROCKFISH COOPERATIVE MEMBER(S)
(To Be Completed By Transferee)

A rockfish cooperative receiving primary rockfish species CQ by transfer must assign that primary rockfish species CQ to a member of the rockfish cooperative for purposes of applying the use caps established under § 679.82(a). Duplicate this page as necessary.

Enter the name of Qualifying Member, NMFS Person ID, species transferred, and amount of CQ transferred.

BLOCK F^1 -- CERTIFICATION OF TRANSFEROR

Enter printed name and signature of transferor, and date signed. If designated representative, **attach** authorization.

BLOCK F^2 -- CERTIFICATION OF TRANSFEROR'S PROCESSOR

Enter printed name and signature of transferor's processor, and date signed. If designated representative, **attach** authorization.

BLOCK G^1 -- CERTIFICATION OF TRANSFEREE

Enter printed name and signature of transferee, and date signed. If designated representative, **attach** authorization.

BLOCK G^2 -- CERTIFICATION OF TRANSFEREE'S PROCESSOR

Enter printed name and signature of transferee's processor, and date signed. If designated representative, **attach** authorization.

ROCKFISH PROGRAM VESSEL CHECK-IN/CHECK-OUT & TERMINATION OF FISHING REPORT	U.S. Department of Commerce NOAA/National Marine Fisheries Service, Alaska Region Post Office Box 21668 Juneau, Alaska 99802-1668 Fax: 907-586-7269 Telephone: 907-586-7131

Each check-in report, check-out report, and termination of fishing declaration **must be submitted ONLINE at https://alaskafisheries.noaa.gov/webapps/efish/login**

BLOCK A -- COOPERATIVE INFORMATION		
1. Name of Rockfish Cooperative:	2. NMFS Person ID:	3. CQ Permit Number:
4. Name of Cooperative Representative:	5. Signature of Representative:	
6. Permanent Business Address:		
7. Business Telephone Number:	8. Business Fax Number:	9. Business E-mail Address:
BLOCK B – VESSEL INFORMATION		
1. Name of Vessel:		
2. USCG Designation Number:	3. FFP Number:	4. ADF&G Vessel Registration Number:
BLOCK C – VESSEL CHECK-IN OR CHECK-OUT REPORT		
1. Indicate whether this is a check-in or checj-out report [__] Vessel Check-in [__] Vessel Check-out		
2. Date Effective:	3. Time Effective:	
BLOCK D – TERMINATION OF FISHING DECLARATION		
Date Declaration Submitted:		

Instructions

ROCKFISH PILOT PROGRAM
CHECK-IN/CHECK-OUT REPORT

CHECK-IN.

Before a vessel may fish under a Rockfish Cooperative Quota (CQ) permit, the designated representative must submit a check-in report to NMFS. The Check-in Report authorizes a vessel to fish under the CQ permit.

- The designated representative for a rockfish cooperative must submit this designation for a vessel at least 48 hours prior to the time the vessel begins a fishing trip to fish under a CQ permit; and
- A check-in report is effective at the beginning of the first fishing trip after the designation has been submitted.

CHECK-OUT.

The designated representative must submit a Check-out Report for any vessel that is no longer fishing under the CQ permit for that rockfish cooperative within the time limits given below:

- The check-out report must be submitted within 6 hours after the effective date and time the rockfish cooperative wishes to end the vessel's authority to fish under the CQ permit.
- This designation is effective at:
  - The end of a complete offload if that vessel is fishing under a CQ permit for a catcher vessel cooperative

or the earlier of;

  - The end of the week-ending date as reported in a production report if that vessel is fishing under a CQ permit for a catcher/processor cooperative; or
  - The end of a complete offload if that vessel is fishing under a CQ permit for a catcher/processor cooperative.

TERMINATION OF FISHING DECLARATION

Enter date Declaration submitted

When complete, the designated representative of the rockfish cooperative must submit a vessel check-in/check-out and termination of fishing declaration online at https://alaskafisheries.noaa.gov/webapps/efish/login

If you need additional information, contact Sustainable Fisheries Division at 907-586-7228.

COMPLETING THE REPORT

BLOCK A -- COOPERATIVE INFORMATION

1. Name of Rockfish Cooperative
2. NMFS Person ID
3. CQ Permit Number
4. Name of Cooperative Representative
5. Signature of Representative
6. Permanent Business Address
7. Business Telephone Number
8. Business Fax Number
9. Business E-mail Address

BLOCK B – VESSEL INFORMATION

1. Name of Vessel
2. U.S. Coast Guard (USCG) Designation Number
3. Federal Fisheries Permit (FFP) Number
4. Alaska Department of Fish and Game (ADF&G) Vessel Registration Number:

BLOCK C – VESSEL CHECK-IN OR CHECK-OUT REPORT

1. Indicate whether this is a check-in or check-out report
2. Date Effective
3. Time Effective

BLOCK D – TERMINATION OF FISHING DECLARATION

Date Declaration Submitted

PUBLIC REPORTING BURDEN STATEMENT

Public reporting for this collection of information is estimated to average 30 minutes 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) Responses to this information request are confidential under section 402(b) of the Magnuson-Stevens Act. They are also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics.

Rockfish Cooperative Report	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 / (907) 586-7202 in Juneau (907) 586-7354 fax

Each Rockfish cooperative must submit an annual Rockfish Cooperative report to NMFS detailing the use of the cooperative's cooperative quota (CQ) by December 15 of each year.

The annual rockfish cooperative report may be submitted to the Regional Administrator

by an electronic data file to	eFISH at https://alaskafisheries.noaa.gov/webapps/efish/login
by fax to	907-586-7557
or by mail to	Regional Administrator NMFS Alaska Region P.O. Box 21668 Juneau, AK 99802-1668

The Annual Rockfish Cooperative Report must contain the following information:

- Cooperative's CQ
- Any rockfish sideboard fishery harvests made by cooperative vessels on a vessel-by-vessel basis
- Actual retained and discarded catch of CQ
- Sideboard limit (if applicable) by statistical area and vessel-by-vessel basis
- Describe method used by the cooperative to monitor fisheries in which cooperative vessels participated
- Describe any actions taken by the cooperative in response to a member exceeding their catch as allowed under the rockfish cooperative agreement

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PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection-of-information is estimated to average 40 hours per response, including the time for reviewing the instructions, searching the existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Assistant Regional Administrator, Sustainable Fisheries Division, NOAA National Marine Fisheries Service, P.O. Box 21668, Juneau, AK 99802-1668.

ADDITIONAL INFORMATION

Before completing this form, please note the following: 1) Notwithstanding any other provision of law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection-of-information subject to the requirements of the Paperwork Reduction Act, unless that collection-of-information displays a currently valid OMB Control Number; 2) This information is mandatory and is required to manage commercial fishing efforts under 50 CFR part 679 and under section 402(a) of the Magnuson-Stevens Act (16 U.S.C. 1801, *et seq*.) as amended in 2006; 3) Responses to this information request are confidential under section 402(b) of the Magnuson-Stevens Act as revised in 2006. They are also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics.

ROCKFISH PROGRAM
Ex-vessel Volume and Value Report

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

This form must be submitted ONLINE

Did the Shoreside Processor receive any rockfish during this current fishing year?

YES [__] NO [__]

If NO, stop. You do not need to submit this report.

BLOCK A – ROCKFISH PROCESSOR IDENTIFICATION		
1. Name of Shoreside Processor	2. Federal Processor Permit No.	
	3. NMFS Person ID	
	4. Port Location	
5. Business Mailing Address Permanent [ ] or Temporary [ ]		
6. Business Telephone No.	7. Business Fax No.	8. Business E-mail Address

BLOCK C – CERTIFICATION	
Under penalties of perjury, I declare that I have examined this submission of material, and to the best of my knowledge and belief, the information presented here is true, correct, and complete.	
1. Printed Name (if authorized representative, **attach** authorization)	
2. Signature	3. Date

INSTRUCTIONS
FOR
ROCKFISH PROGRAM
EX-VESSEL VOLUME AND VALUE REPORT

This form must be submitted ONLINE.

A rockfish processor that receives and purchases landings of rockfish cooperative quota (CQ) must submit annually to NMFS a complete Rockfish Ex-vessel Volume and Value Report, as described in §679.5(r)(10), for each reporting period for which the rockfish processor receives rockfish CQ groundfish. All shoreside processors that buy fish from fishermen must submit this information. NOTE, if no ex-vessel sale occurs (e.g., if the processor accepted fish for special processing), do not include that sale.

The reporting period of the Rockfish Ex-vessel Volume and Value Report shall extend from May 1 through November 15 of the current year. The processor must include all pounds and associated value of any purchased landings.

The purpose of this report is to collect information from all buyers that operate as shoreside processors, so that NMFS Sustainable Fisheries Division can establish a standard ex-vessel price. The standard price will be used to assess a fee from permit holders.

The Rockfish Ex-vessel Volume and Value Report must be submitted on line and must be received by the NMFS Regional Administrator no later than December 1 of the year in which the rockfish processor received the rockfish CQ groundfish.

To submit a Rockfish Ex-vessel Volume and Value Report online, the rockfish processor must log in to http://alaskafisheries.noaa.gov using the Rockfish Processor's password and NMFS person ID. Instead of a signature, the rockfish processor enters the NMFS ID and password and submits the report, which certifies that all information is true, correct, and complete to the best of his or her knowledge and belief.

COMPLETING THE REPORT

The Rockfish Ex-vessel Volume and Value Report must include the following information.

Indicate if the shoreside processor received any rockfish during the current fishing year.
If NO, stop, you are not required to submit this report

BLOCK A – ROCKFISH PROCESSOR IDENTIFICATION

1. Name of shoreside processor receiving fish from harvester
2. Federal Processor Permit (FPP) number
3. Enter NMFS person ID
4. Business Mailing Address, including zip code. Indicate whether permanent or temporary address.
   If you check Permanent Address, we will update the database.
   If you check Temporary Address, we will use it for this one application and not change the RAM database.

5-7. Business telephone number, business fax number, including area code, and business e-mail address.

8. Enter the port location where landings occurred.

BLOCK B - CERTIFICATION

Printed name and signature of Shoreside processor or Authorized Representative and date signed
If authorized representative, **attach** authorization

BLOCK C -- ROCKFISH PROGRAM POUNDS PURCHASED AND EX-VESSEL VALUE

For each primary and secondary species by landing period, enter
Pounds (round weight)
Total gross ex-vessel value paid

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 3 hours per response, including the time for reviewing the instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to: NOAA, National Marine Fisheries Service, Alaska Region, Sustainable Fisheries Division, P.O. Box 21668, Juneau, AK 99802-1668.

ADDITIONAL INFORMATION

Before completing this form please note the following: 1) Notwithstanding any other provision of the law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number; 2) This information is mandatory and is required to manage commercial fishing effort under 50 CFR part 679 and under section 402(a) of the Magnuson-Stevens Act (16 U.S.C. 1801, *et seq.*); 3) Responses to this information request are confidential under section 402(b) of the Magnuson-Stevens Act as amended in 2006. It is also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics.

BLOCK C – ROCKFISH PROGRAM POUNDS PURCHASED AND EX-VESSEL VALUE														
Period Ending	May 31		June 30		July 31		August 31		September 30		October 31		November 15	
	Pounds (round weight)	Total Gross Ex-vessel Value Paid*	Pounds (round weight)	Total Gross Ex-vessel Value Paid*	Pounds (round weight)	Total Gross Ex-vessel Value Paid*	Pounds (round weight)	Total Gross Ex-vessel Value Paid*	Pounds (round weight)	Total Gross Ex-vessel Value Paid*	Pounds (round weight)	Total Gross Ex-vessel Value Paid*	Pounds (round weight)	Total Gross Ex-vessel Value Paid*
Primary Species														
Northern rockfish														
Pacific Ocean perch														
Pelagic shelf rockfish**														
Secondary Species														
Sablefish														
Thornyhead														
Pacific cod (catcher vessel sector)														
Rougheye rockfish (catcher/processor sector)														
Shortraker rockfish (catcher/processor sector)														

*Total Gross Ex-vessel value paid should include the dollar value of purchased pounds before any deductions are made for goods and services (e.g., bait, ice, fuel, repairs, machinery replacement, etc.) provided to the Permit Holder. It should also include price adjustments (retro payments) made in each month to permit holders for landings made during the previous calendar year.

**Pelagic shelf rockfish means *S. variabilis* (dusky), *S. entomelas* (widow), and *S. flavidus* (yellowtail)

Rockfish Cooperative Quota Permit Holder Fee Submission Form	U.S. Department of Commerce/NOAA National Marine Fisheries Service (NMFS) Office of Operations & Management Division (OMD) P.O. Box 21668 Juneau, Alaska 99802-1668 *900) 304-4846 toll free / (907) 586-7202	

Deadline: Submit by February 15 following the calendar year in which any Rockfish CQ landing was made.

BLOCK A-- OVERPAYMENT
If your estimated Balance Due is less than zero (deficit), you **MUST** select one of the following options: [ ] Apply Overpayment to Future Fee Liabilities **OR** [ ] Issue Refund

BLOCK B-- IDENTIFICATION OF ROCKFISH COOPERATIVE		
1. Name of Cooperative	2. NMFS Person ID	
	3. Taxpayer ID (Employer ID No.)	
	4. Date of Incorporation	
5. Business Mailing Address Permanent [ ] or Temporary [ ]		
6. Business Telephone No.	7. Business Fax No.	8. Business E-mail Address (if any)

BLOCK C -- AGREEMENT WITH FEE LIABILITY SUMMARY
Check if you agree with your Fee Liability Summary [ ] YES [ ] NO **If YES**, please date and sign your name where designated in Block D, complete Block E, and mail this Fee Submission Form with your payment, or as indicated in Block E, in the envelope provided. **If NO**, complete Block F (Fee Calculation) using the fee calculation instructions and provide documentation to support your calculations. *See pages 2 and 3 of the attached instructions for additional information.*

BLOCK D -- SIGNATURE	
1. Printed Name of Rockfish Cooperative or Authorized Agent (If agent, **attach** authorization)	
2. Signature of Authorized Agent	3. Date

BLOCK E -- METHOD OF PAYMENT
[ ] Personal Check [ ] Cashiers Check [ ] Money Order Make payable to National Marine Fisheries Service (NMFS) **REMINDER! Sign your check. If paying for multiple permit holders, include their completed and signed Fee Submission Forms.** Charge to the following: [ ] Visa [ ] Mastercard [ ] American Express [ ] Discover Card No: _____ Expiration Date: _____ Card Validation Code (CVC) _____ Amount of Payment: _____ Name as Printed on Card: _____ Signature of Card Holder: _____ Date: _____ **NMFS does not send verification of payment and strongly recommends you retain copies for your records.**

STOP!

Have you completed BLOCK E and included payment of your fee?

Have you made a copy of your fee submission form and check/money order for your records?

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

BLOCK F – FEE CALCULATION						
Permit Number	Date of Landing	Port Location	Pounds	Standard Ex-vessel Price	Actual Ex-vessel Price	Total
Sample	***3/20/2005***	***Sitka***	***5000***		***$2.20***	***$11,000***
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						
16.						

17. Ex-vessel Value Total (add lines 2-16):	
18. Plus Total Adjustments (retros, bonuses):	
19. Subtotal (add lines 17 and 18):	
20. Fee Liability* (multiply the published fee percentage by line 19):	
21. Less Pre-payments or Credits (if any):	
22. Balance Due (enter result after subtracting line 21 from 20):	
23. Enclosed Payment Amount:	

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

Instructions for
ROCKFISH COOPERATIVE QUOTA (CQ)
FEE SUBMISSION FORM

This information is used to verify the identity of the applicant(s) and to accurately retrieve confidential records related to Federal permits. The primary purpose for requesting the SSN/TIN is for the collection and reporting on any delinquent amounts arising out of such person's relationship with the government pursuant to the Debt Collection Improvement Act of 1996 (Public Law 104-134). Personal information is confidential and protected under the Privacy Act (5 U.S.C. 552a). Business information may be disclosed to the public.

All Rockfish CQ permit holders

- who receive Rockfish CQ are responsible for submitting the cost recovery payment for all Rockfish CQ landings made under the authority of a Rockfish CQ permit.
- must maintain and submit records for any rockfish cost recovery fees collected under the corresponding Rockfish CQ permit.
- at the time of a Rockfish CQ landing are subject to a fee liability for any Rockfish primary species and rockfish secondary species debited from a Rockfish CQ allocation during a calendar year, unless the rockfish are confiscated by NMFS or the State of Alaska.
- must submit the Rockfish CQ fee online at eFISH at https://alaskafisheries.noaa.gov/webapps/efish/login
  OR
  Wire money by filling out the FEDWIRE form and wiring money from your bank.

If you have any questions, please call Troie Zuniga (800) 304-4846 (#5) or (907) 586-7202 (#5)

COMPLETING THE FEE FORM

BLOCK A -- OVERPAYMENT

Payment submitted to NMFS in excess of the rockfish cost recovery fee liability will be returned to the Rockfish CQ holder unless the permit holder requests the agency to credit the excess amount against the permit holder's future rockfish cost recovery fee liability.

All refunds will be issued out of the National Oceanic and Atmospheric Administration, Department of Finance, in Silver Spring, Maryland. **Please allow a minimum of eight weeks for your refund to be issued.** If you do not choose one of these options and have an amount due, it will automatically be credited to your Fee Liability Account. Payment processing fees may be deducted from any fees returned to the CQ permit holder.

BLOCK B -- IDENTIFICATION OF ROCKFISH COOPERATIVE

Enter the information requested below in the designated areas

1. Name of Rockfish Cooperative: Full name of the cooperative that is the holder of the cooperative quota.
2. NMFS Person ID: Identification number assigned to the cooperative by NMFS/RAM.
3. Tax ID (EIN or SSN). Enter employer identification number (EIN) of cooperative.

4. Date of incorporation. Enter date of incorporation of cooperative.

5. Business Mailing Address: Business mailing address where information should be sent; include street or P.O. box number, state, and zip code. Check whether the address provided is a permanent or temporary address. If the address is a permanent address, the address will be updated in the official RAM database. If the address is a temporary address, it will be used on a one-time-only basis for processing this form and RAM's database will not be changed.

6-8. Business Telephone Number, Fax Number, and E-mail Address: Business telephone number, business fax number, including area codes, and business e-mail address, if available. Note: It is important to provide a number where messages can be left to avoid delay in processing the Fee Submission Form if any questions arise.

BLOCK C -- AGREEMENT WITH FEE LIABILITY SUMMARY

All cooperatives must complete Blocks A through E of the Fee Submission form. If you indicate in Block C that you are **not in agreement** with the Summary, then also complete Block F (Fee Calculation).

BLOCK D – SIGNATURE OF COOPERATIVE AUTHORIZED AGENT

1. Printed Name of Cooperative and Authorized Agent: Print or type the full name of the cooperative and authorized agent signing on behalf of the cooperative. **Note**: if an authorized agent, authorization must be submitted.

2. Signature of Cooperative Authorized Agent: The authorized agent must sign and date the application where indicated. The application will not be considered without the signature of the authorized agent.

3. Date: Indicate the date on which the Fee Submission Form is signed.

BLOCK E -- METHOD OF PAYMENT

1. Make payment payable to NMFS online. Contact NMFS at: 800-304-4846, Option 2. If you have questions.

2. Payment must be made in U.S. dollars by personal check drawn on a U.S. bank account, money order, or bank certified check.

3. If paying by personal check, cashiers check, or money order, check the appropriate box to indicate the form of payment being used to pay your Fee Liability. A copy of your check or money order should be retained for your own records.

4. If paying by credit card, check the box that indicates the type of card used. **Note:** Only the credit cards listed are accepted for payment at this time. The credit card number, expiration date, the name as printed on the card, and the card holder's signature must be completed for NMFS to accept this form of payment. **If any of the required credit card information is missing, your payment WILL NOT be accepted**.

5. Payments may also be submitted electronically to NMFS.

BLOCK F -- FEE CALCULATION

Complete this block ONLY if you indicated in Block C that YOU DID NOT AGREE with your Fee Liability Summary.

The Rockfish CQ permit holder must use the rockfish fee percentage in effect at the time a Rockfish primary species and rockfish secondary species CQ landing is debited from a Rockfish CQ allocation to calculate the rockfish cost recovery fee liability for such Rockfish primary species and rockfish secondary species.

Fee liability must be calculated by multiplying the applicable fee percentage by the ex-vessel value of the Rockfish primary species and rockfish secondary species CQ received by the Rockfish eligible processor at the time of receipt.

1-16. Permit Number: Enter permit number(s).

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

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

Pounds: Enter the number of pounds landed (include any retained pounds) on permit(s) for specific date(s).

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

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

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

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

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

19. Subtotal: Add lines 17 and 18.

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

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

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

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

Do not forget to sign and enclose your personal or certified check or money order and send it to:

U.S. Dept. of Commerce/NOAA,
National Marine Fisheries Service,
Office of Operations, Management and Information (OMI),
P.O. Box 21668,
Juneau, Alaska 99802-1668.

If paying by credit card, make sure ALL requested card information is provided. **Do not mail cash**.

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

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

PUBLIC REPORTING BURDEN STATEMENT

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

ADDITIONAL INFORMATION

Before completing this form please note the following: 1) Notwithstanding any other provision of the law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number; 2) This information is mandatory and is required to manage commercial fishing effort under 50 CFR part 679 and under section 402(a) of the Magnuson-Stevens Act (16 U.S.C. 1801, *et seq*.); 3) Responses to this information request are confidential under section 402(b) of the Magnuson-Stevens Act as amended in 2006. It is also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics. All information collected is part of a Privacy Act system of records: NOAA #19, Permits and Registrations for United States Federally Regulated Fisheries, published on April 17, 2008 (73 FR 20914).

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promoting ACE services that have an interest in entering or expanding their business in the Qatar market (applicants that would like to add the optional Saudi Arabia stop must meet these criteria for the Saudi Arabia market as well). The following criteria will be evaluated in selecting participants:

- Suitability of a firm's or service provider's (or in the case of a trade association/organization, represented firm or service provider's) products or services to these markets.
- Firm's or service provider's (or in the case of a trade association/organization, represented firm or service provider's) potential for business in the markets, including likelihood of exports resulting from the mission.
- Consistency of the firm's or service provider's (or in the case of a trade association/organization, represented firm or service provider's) goals and objectives with the stated scope of the mission.

Additional factors, such as diversity of company size, type, location, and demographics, may also be considered during the review process.

Referrals from political organizations and any documents, including the application, containing references to partisan political activities (including political contributions) will be removed from an applicant's submission and not considered during the selection process.

Timeframe for Recruitment and Application

Mission recruitment will be conducted in an open and public manner, including publication in the **Federal Register**, posting on the Commerce Department trade mission calendar (*http://www.export.gov/trademissions/*) and other Internet Web sites, press releases to general and trade media, direct mail, broadcast fax, notices by industry trade associations and other multiplier groups, and publicity at industry meetings, symposia, conferences, and trade shows.

Recruitment for this mission will begin immediately and conclude no later than August 30, 2014. The U.S. Department of Commerce will review applications and make selection decisions as quickly as possible. Applications received after August 30, 2014 will be considered only if space and scheduling constraints permit.

Contacts

Trade Missions Office, Arica Young, U.S. Department of Commerce, Washington, DC, Tel: 613–317–7538, Email: *Arica.Young@trade.gov.*

Industry and Analysis, Eugene Alford, U.S. Department of Commerce, Washington, DC 20230, Tel: 202–482–5071, Email: *Eugene.Alford@trade.gov.*

Elnora Moye,

Trade Program Assistant.

[FR Doc. 2014–17972 Filed 7–29–14; 8:45 am]

BILLING CODE 3510–FP–P

DEPARTMENT OF COMMERCE

National Oceanic and Atmospheric Administration

Proposed Information Collection; Comment Request; Alaska Rockfish Program: Permits and Reports

AGENCY: National Oceanic and Atmospheric Administration, Commerce.

ACTION: Notice.

SUMMARY: The Department of Commerce, as part of its continuing effort to reduce paperwork and respondent burden, invites the general public and other Federal agencies to take this opportunity to comment on proposed and/or continuing information collections, as required by the Paperwork Reduction Act of 1995.

DATES: Written comments must be submitted on or before September 29, 2014.

ADDRESSES: Direct all written comments to Jennifer Jessup, Departmental Paperwork Clearance Officer, Department of Commerce, Room 6616, 14th and Constitution Avenue NW., Washington, DC 20230 (or via the Internet at *JJessup@doc.gov*).

FOR FURTHER INFORMATION CONTACT: Requests for additional information or copies of the information collection instrument and instructions should be directed to Patsy A. Bearden, (907) 586–7008 or *Patsy.Bearden@noaa.gov.*

SUPPLEMENTARY INFORMATION:

I. Abstract

This request is for an extension of a currently approved information collection.

The Rockfish Program determines the access and allocation of the Central Gulf of Alaska (GOA) rockfish fisheries and associated halibut prohibited species catch (PSC), also known as the rights of access to the fishery. Cooperatives were established to receive exclusive harvest privileges for rockfish primary and secondary species. These resource allocations are used to assign the available resources in an economic way. In the case of halibut, a specific amount of halibut mortality is assigned to the cooperative, because halibut is often caught incidentally with rockfish.

The rockfish fisheries are conducted in Federal waters near Kodiak, Alaska, primarily by trawl vessels, and to a lesser extent by longline vessels. The Rockfish Program allocates harvest privileges to holders of License Limitation Program (LLP) licenses with a history of Central GOA rockfish landings associated with those licenses.

II. Method of Collection

Respondents have a choice of online, electronic, or paper forms. Methods of submittal include email of electronic forms, and mail and facsimile transmission of paper forms. Online application allows cooperatives to check in and out in conjunction with their current online account balance Web sites.

III. Data

OMB Control Number: 0648–0545.

Form Number: None.

Type of Review: Regular submission (extension of a currently approved collection).

Affected Public: Business or other for-profit organizations.

Estimated Number of Respondents: 55.

Estimated Time per Response: 2 hours for paper or 10 minutes online for Application for Rockfish Cooperative Fishing Quota (CQ); 10 minutes online for Application for Inter-Cooperative Transfer of Rockfish CQ; 40 hours for Annual Rockfish Cooperative Report; 30 minutes for Rockfish Catch Report; 10 minutes online for Rockfish Vessel Check-in/Checkout Report with Termination of Fishing Declaration; 4 hours for Appeals for Denial of Rockfish Permit; and 10 minutes online for Rockfish Ex-vessel Volume and Value Report.

Estimated Total Annual Burden Hours: 490.

Estimated Total Annual Cost to Public: $222 in recordkeeping/reporting costs.

IV. Request for Comments

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden (including hours and cost) of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the

use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and/or included in the request for OMB approval of this information collection; they also will become a matter of public record.

Dated: July 24, 2014.

Gwellnar Banks,

Management Analyst, Office of the Chief Information Officer.

[FR Doc. 2014–17887 Filed 7–29–14; 8:45 am]

BILLING CODE 3510–22–P

DEPARTMENT OF COMMERCE

National Oceanic and Atmospheric Administration

Proposed Information Collection; Comment Request; Alaska Pacific Halibut Fisheries: Charter Permits

AGENCY: National Oceanic and Atmospheric Administration, Commerce.

ACTION: Notice.

SUMMARY: The Department of Commerce, as part of its continuing effort to reduce paperwork and respondent burden, invites the general public and other Federal agencies to take this opportunity to comment on proposed and/or continuing information collections, as required by the Paperwork Reduction Act of 1995.

DATES: Written comments must be submitted on or before September 29, 2014.

ADDRESSES: Direct all written comments to Jennifer Jessup, Departmental Paperwork Clearance Officer, Department of Commerce, Room 6616, 14th and Constitution Avenue NW., Washington, DC 20230 (or via the Internet at *JJessup@doc.gov*).

FOR FURTHER INFORMATION CONTACT: Requests for additional information or copies of the information collection instrument and instructions should be directed to Patsy A. Bearden, (907) 586–7008 or *Patsy.Bearden@noaa.gov.*

SUPPLEMENTARY INFORMATION:

I. Abstract

This request is for an extension of a currently approved information collection.

The Alaska Pacific Halibut Charter Program established Federal Charter Halibut Permits (CHPs) for operators in the charter halibut fishery in IPHC regulatory Areas 2C (Southeast Alaska) and 3A (Central Gulf of Alaska). Since February 1, 2011, all vessel operators in Areas 2C and 3A with charter anglers onboard catching and retaining Pacific halibut must have a valid CHP onboard during every charter vessel fishing trip. CHPs must be endorsed with the appropriate regulatory area and number of anglers.

The National Marine Fisheries Service (NMFS) implemented this program based on recommendations by the North Pacific Fishery Management Council to meet allocation objectives in the charter halibut fishery. This program provides stability in the fishery by limiting the number of charter vessels that may participate in Areas 2C and 3A and decreasing the overall number of available CHPs over time. The program goals are to increase the value of the resource, limit boats to qualified active participants in the guided sport halibut sector, and enhance economic stability in rural coastal communities.

II. Method of Collection

Respondents have a choice of electronic or paper forms. Methods of submittal include email of electronic forms, and mail and facsimile transmission of paper forms.

III. Data

OMB Control Number: 0648–0592.

Form Number: None.

Type of Review: Regular submission (extension of a currently approved collection).

Affected Public: Business or other for-profit organizations.

Estimated Number of Respondents: 1,461.

Estimated Time per Response: 2 hours for Application for Charter Halibut Permit [inactive]; 2 hours for Application for Transfer of Charter Halibut Permit; 2 hours for Application for Military Charter Permit; 2 hours for Application for Transfer between IFQ and Guided Angler Fish; and 4 hours for Appeals.

Estimated Total Annual Burden Hours: 2,160.

Estimated Total Annual Cost to Public: $4,936 in recordkeeping/reporting costs.

IV. Request for Comments

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden (including hours and cost) of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and/or included in the request for OMB approval of this information collection; they also will become a matter of public record.

Dated: July 24, 2014.

Gwellnar Banks,

Management Analyst, Office of the Chief Information Officer.

[FR Doc. 2014–17888 Filed 7–29–14; 8:45 am]

BILLING CODE 3510–22–P

DEPARTMENT OF DEFENSE

Office of the Secretary

[Docket ID DoD–2014–OS–0115]

Privacy Act of 1974; System of Records

AGENCY: Department of Defense.

ACTION: Notice to add a new Privacy Act System of Records.

SUMMARY: In accordance with the Privacy Act of 1974, as amended, the Office of the Secretary of Defense proposes to establish a new system of records for Continuous Evaluation (CE).[1] These records will be used to conduct CE, as defined in Executive Order 13467, to: (1) Identify DoD-affiliated personnel who have engaged in conduct of security concern; (2) identify and initiate needed follow-on inquiries and/or investigative activity and enable security officials and adjudicators to determine and take appropriate actions; and (3) perform research, development, and analyses related to DoD's CE program. These analyses are conducted to: (a) Evaluate and improve DoD and Federal personnel security, insider threat,[2] and other

[1] E.O. 13467 defines continuous evaluation as ''reviewing the background of an individual who has been determined to be eligible for access to classified information (including additional or new checks of commercial databases, Government databases, and other information lawfully available to security officials) at any time during the period of eligibility to determine whether that individual continues to meet the requirements for eligibility for access to classified information.''

[2] The November 21, 2012 Presidential Memorandum, ''National Insider Threat Policy and Minimum Standards for Executive Branch Insider Threat Programs'' identified insider threat programs as including the following: Monitoring user activity on U.S. government networks; continued evaluation of personnel security information; and employee

Continued