
	<h2>Application for Pacific Cod Trawl Cooperative (PCTC) Program Quota Share</h2>	<p>U.S. Dept. of Commerce/NOAA National Marine Fisheries Service (NMFS) Restricted Access Management Program (RAM) P.O. Box 21668 Juneau, AK 99802-1668 (800) 304-4846 toll free / (907) 586-7202 in Juneau (907) 586-7354 fax / RAM.alaska@noaa.gov</p>	
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A person who wishes to receive quota share (QS) in the Pacific Cod Trawl Cooperative (PCTC) Program as an eligible harvester or an eligible processor must submit a timely and complete application for PCTC Program QS.

**This completed application must be received by NMFS no later than **October 10, 2023**.**

**NOTE:** In addition to this application, each year eligible PCTC Harvesters and/or PCTC Processors must assign their PCTC QS to a PCTC cooperative for the cooperative to receive annual Pacific cod cooperative quota. If NMFS approves this application and issues QS, QS holders must join a PCTC Program cooperative.

### ***ELIGIBILITY TO PARTICIPATE***

Please indicate the type of *eligibility to participate* for which you are applying:

- Eligible Harvester** (catcher vessel sector). Applicants must complete Blocks A and B and sign in Block E. **Note:** If you **disagree** with the PCTC Program Official Record Summary, you must also complete Block C.
- Eligible Processor**. Applicants must complete Blocks A and B and sign in Block E. **Note:** If you **disagree** with the PCTC Program Official Record Summary, you must also complete Block D.

### ***BLOCK A – APPLICANT INFORMATION***

1. Applicant Name:	2. NMFS person ID:
3. Business Mailing Address: Permanent <input type="checkbox"/> Temporary <input type="checkbox"/>	
4. Business Telephone Number:	5. Business E-mail Address:

**Note: The Applicant must be a U.S. citizen or U.S. corporation, partnership, or other business entity to obtain a catch history.**

6. Are you a U.S. citizen?

YES     NO    **If YES**, enter date of birth \_\_\_\_\_

7. Are you a U.S. corporation, partnership, association, or other business entity?

YES     NO    **If YES**, enter date of incorporation \_\_\_\_\_

8. Is the applicant a successor-in-interest to a deceased individual License Limitation Program (LLP) license holder?

YES     NO    **If YES**, please attach death certificate.

***BLOCK B – AGREEMENT WITH PCTC PROGRAM OFFICIAL RECORD***

- I AGREE with the PCTC Program Official Record Summary.** If you check this box, you are accepting the PCTC Program Official Record. If you check this box, proceed to Block E, sign the application, and return the application to NMFS.

**Note:** For the initial allocation of PCTC QS, qualifying catch history is attached to the LLP license assigned to the vessel at the time of harvest. If multiple LLP licenses authorized catch by a vessel, in the absence of an agreement provided by the LLP license holder at the time of application, qualifying catch history will be assigned to an LLP license by the owner of the vessel that made the catch.

- I DO NOT AGREE with the PCTC Program Official Record Summary.** I have indicated the areas of disagreement in Block C or D of this form or attached a separate page explaining my disagreement and providing evidence, such as fish tickets or landing reports, to support my claims, and I have completed Block E.
- I DID NOT RECEIVE a PCTC Program Official Record Summary.** I believe that I am eligible to receive QS in the PCTC Program. I have provided the required information in Block C or D of this form or attached a separate page explaining the basis for my eligibility, such as fish tickets or landing reports to support my claim, and I have completed Block E.

**BLOCK C – HARVESTER PACIFIC COD LEGAL LANDINGS**

If you are applying as an eligible harvester and **do not agree** with the PCTC Program Official Record, enter the following information for the original qualifying vessel and other vessels used under authority of each LLP license. Copy this page and/or attach additional sheets if necessary.

**LLP License**

LLP License Holder's Name:	LLP License Holder's NMFS ID:	LLP License Number:

List the vessel(s) that made legal Pacific cod landings under the authority of this LLP license during the qualifying years from 2009 through 2019. List the qualifying years for which you are claiming legal Pacific cod landings for each vessel.

Name of Vessel:	ADF&G Number:	USCG Documentation Number:

Qualifying years during which vessel made legal Pacific cod landings under the authority of this LLP license (2009 through 2019) or AI transferable endorsement (2004 through 2019).

Name of Vessel:	ADF&G Number:	USCG Documentation Number:

Qualifying years during which vessel made legal Pacific cod landings under the authority of this LLP license (2009 through 2019) or AI transferable endorsement (2004 through 2019).

Name of Vessel:	ADF&G Number:	USCG Documentation Number:

Qualifying years during which vessel made legal Pacific cod landings under the authority of this LLP license (2009 through 2019) or AI transferable endorsement (2004 through 2019).

**BLOCK D – PROCESSOR ELIGIBILITY**

If you are applying as an eligible PCTC Processor and do not agree with the PCTC Program Official Record, you must provide the following information to establish your eligibility. Copy or attach additional sheets, if necessary.

Enter the following information for each processor were Pacific cod legal landings were received.

Processor Name	Federal Processor Permit or Federal Fisheries Permit Number	Location of Facility

1. Qualifying years during which processor received Pacific cod legal landings under the authority of this FFP or FPP (2009 through 2019)

2. Attach a copy of the contract to the application that demonstrates that the legal processing history and rights apply for and receive processor eligibility based on that legal processing history have been transferred or retained (if applicable).

**BLOCK E – SIGNATURE OF APPLICANT**

*Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury that the foregoing is true and correct.*

Signature of Applicant or Authorized Representative:

Date Signed:

Printed Name of Applicant or Authorized Representative (*Note: If authorized representative, **attach** authorization*):

## ***PUBLIC REPORTING BURDEN STATEMENT***

A Federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with an information collection subject to the requirements of the Paperwork Reduction Act of 1995 unless the information collection has a currently valid OMB Control Number. The approved OMB Control Number for this information collection is 0648-0811. Without this approval, we could not conduct this information collection. Public reporting burden for this collection of information is estimated to average 2 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 information collection. All responses to this information collection are mandatory and required to manage commercial fishing efforts under 50 CFR part 679 and under section 402(a) of the Magnuson-Stevens Fishery Conservation and Management Act (16 U.S.C. 1801, *et seq.*). Send comments regarding this burden estimate or any other aspect of this information collection, 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.

## ***PRIVACY ACT STATEMENT***

**AUTHORITY:** The collection of this information is authorized by the Magnuson-Stevens Fishery Conservation and Management Act, 16 U.S.C. 1801 *et seq.*

**PURPOSE:** NMFS uses the information provided on this application to verify the identity of the applicant and to accurately retrieve confidential records related to Federal permits to determine eligibility.

**ROUTINE USES:** Disclosure of this information is subject to the published routine uses identified in the Privacy Act System of Records Notice COMMERCE/NOAA-19, Permits and Registrations for the United States Federally Regulated Fisheries. NMFS may post some information from this form on its public website ([www.alaskafisheries.noaa.gov](http://www.alaskafisheries.noaa.gov)). In addition, NMFS may share information submitted on this application with other State and Federal agencies or fishery management commissions, including staff of the North Pacific Fishery Management Council and Pacific States Marine Fisheries Commission. Other information is confidential under section 402(b) of the Magnuson-Stevens Act and NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics.

**DISCLOSURE:** Providing this information is mandatory; failure to provide complete and accurate information will prevent NMFS from issuing the requested permit.

<p style="text-align: center;"><b>Instructions for Application for Pacific Cod Trawl Cooperative Program Quota Share</b></p>
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Please indicate your eligibility:

- Eligible Harvester (catcher vessel sector). Applicants must complete Blocks A and B and sign in Block E. Note: If you disagree with the PCTC Program Official Record Summary, you must also complete Block C.
- Eligible Processor (shoreside, catcher/processors acting as motherships, motherships, and stationary floating processors only). Applicants must complete Blocks A and B and sign in Block E. Note: If you disagree with the PCTC Program Official Record Summary, you must also complete Block D.

If the applicant did not own one or more of the processing facilities through which claiming processor eligibility, attach a copy of that contract to the application.

## ***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.

**This completed application must be received by NMFS no later than October 10, 2023.**

**NOTE:** Participant must be a U.S. citizen or U.S. corporation, partnership, or other business.

A person who wishes to participate in the PCTC Program as an eligible PCTC harvester or processor must submit this application to NMFS.

When complete, submit the application:

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 99801

By email to:                    [ram.alaska@noaa.gov](mailto:ram.alaska@noaa.gov)

Or, 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)

E-Mail Address: [ram.alaska@noaa.gov](mailto:ram.alaska@noaa.gov)

Website: <https://www.fisheries.noaa.gov/region/alaska>

## **COMPLETING THE APPLICATION**

### **BLOCK A – APPLICANT INFORMATION**

1. Applicant Name
2. NMFS Person ID
3. Permanent Business Address, including P.O. Box number or street address, city, state, and zip code
4. Business Telephone Number including area code
5. Business E-mail Address
6. Indicate (YES or NO) if the applicant is a U.S. citizen; if YES, enter date of birth.
7. Indicate (YES or NO) if the applicant is a U.S. corporation, partnership, association, or other business entity; if YES, enter the date of incorporation;
8. Indicate (YES or NO) if the applicant is a successor-in-interest to a deceased individual; if YES, attach death certificate with the application.

**Note: The Applicant must be a U.S. citizen or U.S. corporation, partnership, or other business entity to obtain a catch history.**

### **BLOCK B – AGREEMENT WITH PCTC PROGRAM OFFICIAL RECORD**

All applicants must mark the box that applies to them:

**I AGREE with the PCTC Program Official Record Summary.** If you check this box, you are accepting the PCTC Program Official Record. If you check this box, proceed to Block E to sign the application, and return the application to NMFS. **Note:** For the initial allocation of PCTC QS, qualifying catch history is attached to the LLP license assigned to the vessel at the time of harvest. If multiple LLP licenses authorized catch by a vessel, in the absence of an agreement provided by the LLP license holder at the time of application, qualifying catch history will be assigned to an LLP license by the owner of the vessel that made the catch.

**I DO NOT AGREE with the PCTC Program Official Record Summary.** I have indicated the areas of disagreement in Block C or D of this form or attached a separate page explaining my disagreement and providing evidence, such as fish tickets or landing reports, to support my claims, and I have completed Block E.

**I DID NOT RECEIVE a PCTC Program Official Record Summary.** I believe that I am eligible to receive QS in the PCTC Program. I have provided the required information in Block C or D of this form or attached a separate page explaining the basis for my eligibility, such as fish tickets or landing reports to support my claim, and I have completed Block E.

### **BLOCK C – HARVESTER PACIFIC COD LEGAL LANDINGS**

If you are applying as an Eligible PCTC Harvester and you **do not agree** with the PCTC Program Official Record, enter the following information for each LLP license. Copy Block C or attach additional sheets if necessary.

1. LLP license holder's name
2. LLP license holder's NMFS ID
3. LLP permit number
4. List the vessels that made legal Pacific cod landings under the authority of this LLP license (2009 through 2019), copying additional pages if necessary.
5. Name of vessel
6. ADF&G number
7. USCG documentation number
8. Qualifying years during which vessel made legal Pacific cod landings under the authority of this LLP license (2009 through 2019) or AI transferable endorsement (2004 through 2019).

## **BLOCK D – PROCESSOR ELIGIBILITY**

If you are applying as an eligible PCTC processor and you **do not agree** with the PCTC Program Official Record, enter the following information. Copy Block D or attach additional pages if necessary.

1. Enter the following information for each processor where Pacific cod legal landings were received.

- Processor facility name
- Federal processor permit or federal fisheries permit number
- Location of facility

2. Enter the qualifying years during which processor received Pacific cod legal landings under the authority of this FFP or FPP (2009 through 2019).

3. Attach a copy of the contract to the application that demonstrates that the legal processing history and rights to apply for and receive processor eligibility based on that legal processing history have been transferred or retained (if applicable).

## **BLOCK E – APPLICANT CERTIFICATION**

The applicant must print name, sign, and date the application certifying that all information is true and correct. If the application is completed by the applicant's authorized representative, then proof of authorization must accompany the application.