



| | | | |
|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
|  | <h2 style="margin: 0;">IFQ Permit Holder Fee Submission Form</h2> | 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 (800) 304-4846 (Option 5) toll free / (907) 586-7202 |  |
|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|

BLOCK A -- OVERPAYMENT

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

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

BLOCK B -- IDENTIFICATION OF IFQ PERMIT HOLDER

| | |
|------------------------------|-------------------------------------------|
| 1. Name of IFQ Permit Holder | 2. NMFS Person ID |
| | 3. Taxpayer ID (Employer ID No. or SSN) |
| | 4. Date of Birth or Date of Incorporation |

5. Business Mailing Address (Indicate if this address is Permanent or Temporary)

| | | |
|---------------------------|---------------------|-------------------------------------|
| 6. Business Telephone No. | 7. Business Fax No. | 8. Business E-mail Address (if any) |
|---------------------------|---------------------|-------------------------------------|

BLOCK C -- AGREEMENT WITH IFQ FEE LIABILITY SUMMARY

Check if you agree with your IFQ 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.

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

BLOCK D -- SIGNATURE

| | |
|-------------------------------------------------------------------------------------------|---------|
| 1. Printed Name of IFQ Permit Holder or Authorized Agent (If agent, attach authorization) | |
| 2. Signature of IFQ Permit Holder or Authorized Agent | 3. Date |

BLOCK E -- METHOD OF PAYMENT

Personal Check Cashiers Check Money Order made 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: _____

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

Signature of Card Holder: _____ Date: _____

NMFS does not send verification of payment and strongly recommends you retain copies for your records.

STOP!

Have you completed BLOCK E and included payment of your IFQ FEE?

Have you made a copy of your Fee Submission Form and check or money order for your records?

BLOCK F – FEE CALCULATION

| Permit Number | Date of Landing | Port Location | IFQ Pounds | Standard Ex-vessel Price | Actual Ex-vessel Price | Total |
|------------------------------------------------------------------------|------------------|---------------|-------------|--------------------------|------------------------|-----------------|
| <i>Sample</i> | <i>3/20/2005</i> | <i>Sitka</i> | <i>5000</i> | | <i>\$2.20</i> | <i>\$11,000</i> |
| 1. | | | | | | |
| 2. | | | | | | |
| 3. | | | | | | |
| 4. | | | | | | |
| 5. | | | | | | |
| 6. | | | | | | |
| 7. | | | | | | |
| 8. | | | | | | |
| 9. | | | | | | |
| 10. | | | | | | |
| 11. | | | | | | |
| 12. | | | | | | |
| 13. | | | | | | |
| 14. | | | | | | |
| 15. | | | | | | |
| 16. | | | | | | |
| 17. Ex-vessel Value Total (add lines 1-16): | | | | | | |
| 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 IFQ halibut or sablefish landed on your IFQ permit during the IFQ fishing year. It should represent the total dollar value of IFQ pounds before any deductions are made for goods and services provided (*i.e.*, bait, ice, fuel, repairs, machinery replacement, *etc.*), multiplied by the NMFS published fee percentage for the IFQ fishing year.

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.

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.

Instructions for IFQ PERMIT HOLDER FEE SUBMISSION FORM

After each IFQ fishing year, the National Marine Fisheries Service (NMFS) Regional Administrator will issue each Individual Fishing Quota (IFQ) permit holder a summary of his or her IFQ pounds landed during that IFQ fishing year for each permit as part of the IFQ Landing and Estimated Fee Liability summary. The summary includes an estimated IFQ fee liability based on the standard ex-vessel values of the landings. The summary and estimated fee liability include details of IFQ equivalent pounds landed by permit, port or port-group, species, date, and IFQ standard prices.

The permit holder must either accept NMFS's estimate of IFQ liability or revise NMFS's estimate of IFQ fee liability using this Fee Submission Form. If the permit holder revises NMFS's estimate of his or her fee liability, NMFS requires that the permit holder submit documentation establishing the factual basis for the revised calculation. If the permit holder fails to provide adequate documentation by the 30th day after the date of such request, NMFS will determine the IFQ permit holder's fee liability based on standard ex-vessel values.

An IFQ permit holder with an IFQ landing is responsible for self-collecting his or her own fee during the calendar year in which the IFQ fish is harvested.

An IFQ permit holder must submit his or her IFQ fee liability payment(s) to NMFS at the address provided below no later than **January 31** of the year following the calendar year in which the IFQ landings were made.

Make payment payable to NMFS. Do not forget to sign and enclose your personal or certified check or money order. Send to:

U.S. Dept. of Commerce/ National Oceanic and Atmospheric Administration (NOAA)
National Marine Fisheries Service (NMFS)
Office of Operations and Management Division (OMD)
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.

NMFS does not send 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 IFQ Cost Recovery Program, or any other RAM program,

Call toll free (800) 304-4846 (#5) or (907) 586-7202 (#5).

RAM's program information, applications, and reports can also be located on the Alaska Region Internet site at www.alaskafisheries.noaa.gov.

COMPLETING THE FEE SUBMISSION FORM

All permit holders must complete Blocks A through E of the IFQ Permit Fee Submission form.

BLOCK A -- OVERPAYMENT

If you have a credit from prepayments of the previous year or a balance due that is less than zero (deficit), you must choose to receive a refund or a credit on your future IFQ liabilities. If you do not choose one of these options and have an amount due, it will automatically be credited to your IFQ Fee Liability Account.

All refunds are issued out of the NOAA Department of Finance in Silver Spring, Maryland. **Please allow a minimum of eight weeks for your refund to be issued.**

BLOCK B -- IDENTIFICATION OF IFQ PERMIT HOLDER

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

1. Name of IFQ Permit Holder: Full name of the individual, corporation, association, or partnership that is the holder of the permit.
2. NMFS Person ID: Identification number assigned to the permit holder by NMFS/RAM.
3. Tax ID (EIN or SSN). Enter social security number (SSN) if applicant is an individual. Enter employer identification number (EIN) if applicant is a corporation, partnership, association or other non-individual business entity.
4. Date of birth or Date of incorporation. Enter date of birth if applicant is an individual; enter date of incorporation if applicant is a corporation, partnership, association or other non-individual business entity.
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, fax number, including area codes, and 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 IFQ FEE LIABILITY SUMMARY

If you indicate in Block C that you are not in agreement with the Summary, then you must also complete Block F (Fee Calculation).

BLOCK D – SIGNATURE OF PERMIT HOLDER OR AUTHORIZED AGENT

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

BLOCK E -- METHOD OF PAYMENT

1. If paying by personal check, cashiers check, or money order, check the appropriate box to indicate the form of payment being used to pay your IFQ Fee Liability. A copy of your check or money order should be retained for your own records.
2. If paying by credit card, check the box that indicates the type of card used. **Note**: Only the credit cards listed are accepted for payment through NMFS/OMD 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 OMD to accept this form of payment. **If any of the required credit card information is missing, your payment WILL NOT be accepted.**

BLOCK F -- FEE CALCULATION

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

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.

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

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

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

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

17. Ex-vessel Value Total: Add lines 1 through 16 to get the subtotal of fees owed for all permits.
18. Plus Total Adjustments: Add total adjustments (retros or bonuses paid in current year for previous year).
19. Subtotal: Add lines 17 and 18.
20. Fee Liability: Multiply the permit(s) subtotal (line 19) by the published fee percentage.
21. Less Pre-Payments or Credits: Subtract any pre-payments or credits from line 20. If you have a pre-payment or credit, it will be indicated on your IFQ Fee Liability Summary.
22. Balance Due: This indicates your balance due or credit after subtracting line 21 from 20. If you show a credit, return to Block A and check whether you would like your credit refunded or have it applied to future fee liabilities. If you show a balance owed, fill in line 23.
23. Enclosed Payment Amount: If you show a balance owed, enter the amount of the payment you are submitting.

Notice to Customers Making Payment by Check

When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction.

Privacy Act – A Privacy Act Statement required by 5 U.S.C. § 552a(e)(3) stating our authority for soliciting and collecting the information from your check, and explaining the purposes and routine uses which will be made of your check information, is available from our Internet site at <https://pccotc.gov/pccotc/index.htm> or call toll free at 1 (866) 945-7920 Option 4 to obtain a copy by mail. Furnishing the check information is voluntary, but a decision not to do so may require you to make payment by some other method.

Return Item Service Fee

If the electronic fund transfer cannot be completed because there are insufficient funds in your account, we may impose a one-time fee of \$25.00 against your account, which we will also collect by electronic fund transfer.