

## Commercial Fisheries Entry Commission Request for Reissue and Transfer of Foreclosed Entry Permit

PO Box 110302 Juneau, AK 99811-0302 Phone: 907-789-6150 Toll-Free: 1-855-789-6150

Fax: 907-789-6170 www.cfec.state.ak.us

## PLEASE ALLOW UP TO 2 WEEKS FOR PROCESSING

Please complete all sections and pages of this form and submit with the \$50.00 transfer processing fee, the transfer agreement and bill of sale or contract stating the terms of this request. To avoid delays in processing, please complete all sections of this form and submit all documents requested.

		Date Approved:	Tı	ransfer Office	r:
PERMIT INFORMATION: Must be complete	ed by the current	t permit holder			
A request is hereby made for the entry permit permanently transferred to the transferee lister				, 1	o be
The above referenced entry permit was proper Development under AS 16.10.335 or the Alas proposed transferee meets the qualifications AS 16.10.333 - 16.10.338 or AS 44.81.225, a	ka Commercial F for permanent tra	ishing and Agricultur Insfer and reissuanc	re Bank (CFAB)	under AS 44.	81, and the
TRANSFEREE INFORMATION: Must be con	npleted by the pro	oposed transferee			
Name of Transferee (print clearly)	Social	Security Number	Date of B	irth ADF	G Number
Permanent Mailing Address	check box if you want phone #		Stat		Zip
Phone Number Email address  PERMIT RENEWAL INFORMATION:  For the purpose of assessing fees for the application for, annual issu issuance, or renewal, and throughout the 12-month period before tha not obtain benefits under a claim of residency in another state, territor person has no present intention of moving and to which the person in Do you qualify as an Alaska resident under this If you claim Alaska residency, please provide so 1. What is your current physical address: (No 2. Within the previous 365 days, have you re: 3. Do you have a current Alaska driver's licer ***NOTE: If you answered 'no' to question  REQUIRED INFORMATION:  1. I certify that I am physically able to harvest fis: 2. I have reasonable access to the commercial fit 3. I intend to fish this permit during the upcoming **NOTE: If you are not physically able to participa need to attach an explanation of your intent in acque  AFFIDAVIT:	and email unlisted: ance of, or renewal of entrat date, that individual main on, or country. For the purpotends to return whenever definition? YES one additional information of PO boxes) sided anywhere else? ase or other Alaska ID 3, please provide a but in the fishery for vishing gear used in g season.  Ite in the fishery or ulring this permit.	ntained their domicile in this statuoses of this section, "domicile" the person is away; domicile m NO mation for verification:  PYES NO If yes, DYES NO If yes, rief explanation of why you which this permit is valued this fishery.	dividual is a resident of the dividual is a resident of the did not claim residency means the true and permay be proved by presenting where?  where?  yes, provide number:  bu qualify as an Alast  YES  YES  YES  ing the upcoming	is state if, on the dat in another state, terranent home of a period evidence acceptal evidence acceptal ka resident  NO NO NO	e a copy of your card e of permit application, itory, or country, and did son from which the ole to the commission.
AFFIDAVII.	☐ Depart	ment of Commerce, Co Commercial Fishing &	ommunity & Econo	omic Developm	ent
Permit Holder: Signature	······	Transferee: Signature			
Subscribed and sworn to before me this, 20 at					
Notary Public (or Postmaster in Alaska)		Notary Public (or Postr	naster in Alaska)		
Commission Expires:		Commission Expires:			

Revised November 2022 Form# 05-25A PAGE 1

REQUIRED PERMANENT TRANSFER INFORMATION								
The information requested in this survey is required for all transfers.								
TO BE COMPLETED BY THE PROPOSED TRANSFEREE								
How did you locate     □ Relative or perso     □ Casual acquaint      What is your relative.	onal friend ance	☐ Comi ☐ Brokenolder? (check one	mission's list of per answer)	) permits	•	ement xplain)		
□ None □ Business partne	r		onal friend ber of immediat	e family	☐ Other re ☐ Other (e			_
3. How is the permit ☐ Permit purchase ☐ Combined purch	being acquired? (che only ase (with vessel, gear,	☐ Gift	)		□ Inheritar □ Other (e			_
Vessei \$ Gear \$	se price or trade valu	_ (	Other \$ explain)	transfer?				
provide the inform transfer form. Name and addres	nancing are being us ses (incl. cash) \$ ation requested belo ss of person or entity they are providing \$	If any wand you must sulproviding money:	bmit your agree	ment with that p	erson or entity	in writing along	g with this comp	se oleted
DCCED (Division	of Economic Develo	pment) \$						
Fish Processor (you must submit the promissory note) \$ Trade - list items and values								
AK Comm Fish &	Agri Bank (CFAB)	\$				\$		
Bank or other len (you must submit th		\$		Other		<b></b>		
Transferor (seller)	)	\$		Other		Ψ		
, ,	submit the agreemer	nt in writing.	-			•	☐ YES	
7. Is there an agreen If yes, you MUST	nent concerning future submit the agreemer	e transfers of this p nt in writing.	ermit? (check yo	our answer)	NO YE	ES .		
8. Is there an agreen If yes, you MUST	nent for you to pay the submit the agreemer		on of your earnir	ngs from fishing	the permit? (cl	neck your answ	er) NO 1	YES
TO BE COMPLET	ED BY THE CURR	ENT PERMIT HO	<u>DLDER</u>			_		
1. Are you and/or the If yes, which firm o	transferee using the person is acting as		er to transfer this	permit? (check	one answer)	□NO	☐ YES	
2. How much are you	paying in brokers fee	es for the permit sal	e?			\$		
3. What is the net price	e you will receive fro	m the sale of the pe	ermit?			\$		
4. How is the purchas	e price to be paid to	you? (check one ar	nswer) 🔲 In fu	Il at time of trans	sfer 🔲 Ir	periodic paym	ents over time	
5. What is your reaso Retirement Health problem	n for transferring the	☐ Entering	answer) g a different fish ue a non-fishing			g is no longer p (explain)		
THIS SECTION IS OPTIONAL AND IS NOT REQUIRED The section is protected by the Alaska Human Rights Law AS 18.80.255.								
What is your ethnic Permit Holder Transferee	Alaska Native	-	] Black □ Asi ] Black □ Asi	-	_	Other		

NOTICE REGARDING PERSONAL INFORMATION: Under AS 16.43.100, the Commercial Fisheries Entry Commission (CFEC) requests the information on this form so that CFEC can process your licensing request. You must provide the requested information for processing of your licensing request; if you do not provide all of the requested information, CFEC may deny your request. To the extent permitted by state and federal law, CFEC may share the requested information with other state and federal agencies for the purpose of determining whether to grant your request and for law enforcement and other governed purposes. Also, unless an exception applies (e.g. for medical information) requested information may be subject to disclosure under AS 40.25.110. To challenge under AS 40.25.310 the accuracy or completeness of your personal information that CFEC maintains, please send the following information to Attn: CFEC Records Officer, PO Box 110302, Juneau, AK, 99811: a description of the challenged information; the records that contain the information; the changes necessary to make the information accurate or complete; and the address where CFEC can contact you.

Revised November 2022 Form# 05-25A PAGE 2



## Commercial Fisheries Entry Commission Credit Card Authorization

PO Box 110302 Juneau, AK 99811-0302 Phone: 907-789-6150 Toll-Free: 1-855-789-6150

Fax: 907-789-6170 www.cfec.state.ak.us

I authorize the Commercial Fisheries Entry Commission (CFEC) to charge the card listed below. This payment is only valid for the items and amount listed.

Please indicate the permit and/or vessel numbers in the space provided and the total amount you are authorizing your card to be charged.

FEES TO BE CHARGED TO CARD				
Item(s)	Enter Permit & Vessel Numbers	Fee Amount		
Permit(s):		\$		
Vessel(s):		\$		
Transfer Fees (\$50):		\$		
Duplicate Fees (\$20):		\$		
Immediate Fishing (\$80):		\$		
Check here to have your licenses express mailed and that you agree to pay the current USPS express mail rate <b>PLUS</b> the CFEC service fee of \$15.00.				
	Total amount to be charged	\$		
Name of Cardholder:				
Cardholder Phone Number:				
Cardholder Signature:	Date:			
Card type: Visa	Mastercard Discover			
Expiration Date:/				
Credit Card #:				
DO NOT EMAIL THIS FORM. PLEASE FAX OR MAIL FORM.				