

Nunatsiavut Government Commercial Fishery Designation Application

For more information, contact Todd Broomfield, Director of Renewable Resources, at (709) 923-2365 ext. 227

Assessment of Eligibility, Experience, & Past Performance

Name: _____ Beneficiary Number: _____

Tel. Number: _____ Email Address: _____

Mailing Address: _____

Residential Address (if different than mailing address): _____

Do you currently have Northern Labrador Core Status? **Yes / No**

If **yes**, what year did you receive your Northern Labrador Core Status: _____

Do you have Marine Basic First Aid? **Yes / No** Expiry Date: _____

Do you hold a Professional Fish Harvester Certification? **Yes/ No**

If **yes**, what certification do you hold? **Apprentice / Level I / Level II**

If **no**, do you plan on acquiring Professional Fish Harvester Certification? **Yes/ No**

If **yes**, please outline details of your plan to obtain certification, what level of certification you will be seeking, and the estimated date of completion:

Please attach copies of your Marine Basic First Aid and Professional Fish Harvester certificates.

How many years have you participated in the inshore or offshore commercial fishery?

How many years have you relied on the inshore or offshore commercial fishery as your primary source of income?

How many years have you been designated to harvest under one of the Nunatsiavut Government's quotas or licenses?

When was the first year you received a Designation?

What species have you harvested most recently? Where? And with whom?
If more space is needed, attach additional pages as required.

Please attach copies of your Annual Reports for the previous 5-year Designation Cycle, including the one for the year just completed (for the inaugural multiyear application or if you are a new Applicant, no Annual Reports are expected to be provided).

Have you ever had a Designation revoked by the Director of Renewable Resources?

Yes/ No

Did you transfer a portion of your Designation for medical cause at any time in the previous year?

Yes/ No

If yes, have you received an approved Medical Certificate of Seafarer Fitness?
Please attach a copy of this certificate (if applicable).

Yes/ No

Designation Request

Under which Nunatsiavut Government license or licenses are you applying to harvest?
Mark X on all that apply and indicate how much quota you are requesting (in pounds).

		X	Requested Quota (lbs) ¹⁹
1.	Area 2HJN snow crab		
2.	Area 2J South snow crab		
3.	Area 2H Exploratory crab		
4.	Area SFA ²⁰ 4 shrimp		
5.	Area SFA 5 shrimp		
6.	Area 2+3K Competitive Greenland halibut:		
7.	Area 2 Communal Greenland halibut allocation:		
8.	Area 1 Competitive scallop ²¹		
9	Northern Cod		

¹⁹ There is no guarantee that an Applicant will receive the exact amount of their requested poundage.

²⁰ Shrimp Fishing Area

²¹ This policy is not intended to cover the Competitive Scallop Fishery as it stands in 2019, given the logistics of the fishery. Over the second cycle of the policy we will review how the Competitive Scallop Fishery will be integrated into Multiyear Designations. Applications for the Competitive Scallop Fishery are also due in March.

Harvesting Plan

Please make an X in the box next to the harvesting structure that describes how you plan to fish.

Vessel ownership Labrador Inuit Settlement Area (LISA)-resident Beneficiary harvester	
Vessel ownership non-LISA-resident Beneficiary harvester	
Lease-to-Own Arrangement with LISA-resident Beneficiary harvester	
Lease-to-Own Arrangement with non-LISA-Beneficiary harvester	
Lease-to-Own Arrangement with non-Beneficiary harvester	
Shareholding venture between LISA-resident Beneficiary harvester and non-Beneficiary harvester	
Shareholding venture between non-LISA-resident Beneficiary harvester and non-Beneficiary harvester	
Shareholding venture between LISA-resident Beneficiary harvester and non-LISA-resident Beneficiary harvester	
Cooperative Arrangement with LISA-resident Beneficiary harvester	
Cooperative Arrangement with non-LISA-resident Beneficiary harvester	
Cooperative Arrangement with non-Beneficiary harvester	
Annual Lease-to-Own or Cooperative Arrangement (for Annual Designation)	
If your arrangement is something other than those listed above, please attach a sheet explaining said arrangement.	

If your arrangement is something other than those listed above, please attach a sheet to explain. In cases that do not fit into these categories, the Fishery Review Committee (FRC) may come to a consensus on an appropriate score for unique applications

Describe this harvesting structure in more detail including who owns the vessel and their contact information, and other relevant details.

If more space is needed, attach additional pages as required.

Describe the vessel that will harvest the Designation by completing the table below. If more than one vessel will be used, attach additional pages as required.

Vessel Name	
Vessel Owner	
Registration Number	
Home Port	
Year Built	
Last Transport Canada Inspection (Year)	
Length (specify metres or feet)	
Hull Construction Material (e.g., steel, fiberglass)	
Engine Description (e.g., diesel)	
Engine Horsepower	
Number of Engines	
Maximum Speed (knots)	
Crew Size	
Number of Berths	
Rigged For	

Hold Capacity	
Other Relevant Details (e.g., presence of Refrigerated Sea Water system)	

Describe your fishing plan for the requested Designation by filling out the table below using your best estimation.

Use one table per species, attach additional tables as required.

Species and Fishing Area	
Fishing Start Date (your start date – not the fishing season)	
Fishing End Date (your finishing end date – not the fishing season)	
Number of Trips	
Length of Each Trip	
Type and Amount of Gear Used (e.g., 10 traps, 10 tubs of longline hooks, and so on)	
Bait Type	
Estimated Catch Per Trip (lbs)	
Total Catch for Fishing Season (lbs)	
Landing Location	
Other Relevant Details	

Business Plan

Describe the expectations of your Business Plan by filling out the table below. Use these expectations to calculate your Business Plan's financial projections to your best possible estimation. Fill out only the species and areas you have requested Designations for. Fill out all operating costs.

Species	Area	Amount Requested (lbs)	Number of Trips	Catch Per Trip (lbs)	Price Per lb
Snow crab	2HJN				
Snow crab	2J South				
Shrimp	SFA 4				
Shrimp	SFA 5				
Greenland halibut	2+3K Competitive				
Greenland halibut	Communal				
Competitive scallop	Area 1				

Operating Cost	Amount Required (in lbs or liters)	Cost Per Quantity (per lbs or liters)	Total Cost
Bait			
Fuel			
Inflation Rate/Year			

Fill out the Business Plan Template (available as a Microsoft Excel file from the Department of Lands and Natural Resources) to simplify calculations. Attach completed Business Plan Template as your financial projections.

Provide the financing terms of your vessel ownership loan below. If this is not applicable, provide the financial terms of your Lease, Shareholding, or Cooperative Arrangement below. If more space is needed, attach additional pages as required.

Benefits Plan

Provide the number of crew positions for Beneficiaries that will be created each year of the Multiyear Designation. Also indicate what percentage of the total crew positions will be Beneficiaries. Do not include yourself in these numbers.

	Year 1	Year 2	Year 3	Year 4	Year 5
Number of Labrador Inuit Settlement Area (LISA)-resident Beneficiary crew positions					
Percentage of LISA-resident Beneficiary crew positions relative to total crew size ²²					
Number of non-LISA-resident Beneficiary crew positions					
Percentage of non-LISA-resident Beneficiary crew					

²² To calculate a percentage, divide the subset by the total number then multiply by 100. For example, number of LISA-resident Beneficiaries by the total number of crew members. If the total crew is 10 people and the number of LISA-resident Beneficiaries within the crew is 3, divide 3 by 10 (3/10) = 0.3 x 100 = 30 so the percentage of LISA-resident Beneficiaries is 30 percent.

positions relative to total crew size					
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Describe any other benefits you intend to invest in as a result of this Designation.²³ Provide estimates of costs where applicable. Exclude your Nunatsiavut Commercial Fisheries Fund contributions.

If more space is needed, attach additional pages as required.

Completed applications and required supporting documents should be clearly addressed: "Attention to the Director of Renewable Resources". Applications and supporting documents can be delivered by one of the following methods:

1. Hand delivery to Nain Administration Building, 25 Ikajuktauvik Road, Nain NL
2. Mail to the following address:
Nunatsiavut Government, 25 Ikajuktauvik Road, PO Box 70, Nain NL, AOP-1L0
3. Email to: colin.webb@nunatsiavut.com
4. Fax to: (709) 922-2931

<u>Signature Required:</u>	
I certify that that the information I have provided is accurate and true.	
Applicant's Signature: _____	Date: _____

²³ Investment is broadly considered here to mean any of the following but not limited to: formal mentorship of crew members, providing/attending additional training, fisheries research and development efforts (e.g. quality improvement projects, gear technology research, emerging fisheries), charitable contributions to Nunatsiavut-based programs from revenue generated by Designations; or participation in fisheries consultations (such as those held by Fisheries and Oceans Canada, the Nunatsiavut Government, or Torngat Fish Producers Co-op).

Please note that applications will be assessed based on the necessary supporting documents provided prior to, or by the deadline, of this application.

Completed applications must be returned by February 28 Annually

**Nunatsiavut Government's Multi-Year Commercial Fishery Designation Policy
Business Plan - Financial Projections - Page 1**

Allocation Requested

Indicate the level of allocation requested (in pounds) per species and area per year.

Species	Area	Amount Requested
Snow Crab	2J North/H South	
Snow Crab	2J South	
Shrimp	SFA 4	
Shrimp	SFA 5	
Greenland Halibut	2+3K Competitive	
Greenland Halibut	Communal	

Fishing Plan

Indicate the approximate number of trips and catch per trip (in pounds) for each species an allocation has been requested.

Species	Area	Number of Trips	Catch per trip
Snow Crab	2J North/H South		
Snow Crab	2J South		
Shrimp	SFA 4		
Shrimp	SFA 5		
Greenland Halibut	2+3K Competitive		
Greenland Halibut	Communal		

