



2016 ADEC Seafood Processors Application



Application instructions can be found: http://dec.alaska.gov/eh/fss/forms/forms_home.html

OWNER INFORMATION					
Name of Entity or Owner Responsible			ADEC Permit Number AK- <input type="checkbox"/> Check if new	Contact Name	
Company or Business Name			Permanent Phone Number	Fax Number	
Business Mailing Address			Radio/Cell Number	E-mail Address	
City	State	Zip Code	Check one: <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Other		
Federal EIN (Employer Identification Number) (No SSN#)			AK Fisheries Business License # <input type="checkbox"/> Check if new	Processing or packaging done by another permitted firm? Firm's name:	
SHORE-BASED FACILITY INFORMATION					
Name of Facility			Previous Name of Facility (if applicable)	Name of Owner	
Physical Location of Facility (Physical Address is Required)			Number of Employees	APDES/NPDES Permit Number	
Facility/Seasonal Mailing Address			Does your facility provide food service? <input type="checkbox"/> Yes <input type="checkbox"/> No Food Service Permit Number:		CFN/FEI (assigned by FDA)
City	State	Zip Code	Seasonal Phone Number	Radio/Cell Number	
Plant Manager or Quality Control Contact			Fax number	E-mail Address	
VESSEL INFORMATION					
Name of Vessel			Previous Name of Vessel (if applicable)	NOAA Fed Fisheries Permit #	
Owner Name			USCG Vessel Documentation Number	APDES/NPDES Permit Number	
Vessel Manager or Quality Control Contact			CFN/FEI (assigned by FDA)	Overall Vessel Length	ADF&G Vessel # Issued by CFEC
Alaska Port/Mooring Location			Number of Employees	Does your vessel provide food service? <input type="checkbox"/> Yes <input type="checkbox"/> No Food Service Permit Number:	
Vessel/Seasonal Mailing Address			Seasonal Phone Number	Radio/Cell Number	
City	State	Zip Code	Fax number	E-mail Address	
TYPES OF FISHERIES / FEES			PAYMENT		
FACILITY Shore-based < 5000 lbs/day - \$795 Shore-based > 5000 lbs/day - \$2,094 Cannery < 5000 lbs/day - \$1,120 Cannery ≥ 5000 lbs/day - \$2,094 Direct Market Land-Based - \$200 VESSEL Direct Marketing Vessel <65ft - \$325 Vessels < 5000 lbs/day - \$795 All other vessels - \$2,094			Make checks payable to: State of Alaska Mail to: State of Alaska DEC – FSS, Seafood Permits 555 Cordova St, 5 th Floor Anchorage, AK 99501 To pay by credit card, call (907)269-7501. (Please do not include credit card number on this form.) Payment Amount: \$ _____		
<p>You are required to complete the entire application (pages 1-5) if you meet the following:</p> <ul style="list-style-type: none"> * New operator (submit drawings of the facility or vessel with the application). * Facilities that have undergone significant changes (including changes in ownership). Include drawings of structural or equipment changes. * Operators who have permit numbers where the last three digits are between 000-300 must complete pages 1-5. You are not required to submit drawings or equipment information unless you have made significant changes. <p>All other operators who have permit numbers where the last three digits are between (301-600) and (601-999) need only complete pages 1-2</p>					
There may be additional seafood processing requirements. If you have questions, please contact the following:			* ADF&G - Shellene Hutter at 907-465-6131 * Wastewater - Clynda Case at 907-269-7561 * Drinking Water - Cindy Christian at 907-451-2138		
SIGNATURE					
By signing this application, I agree to abide by the applicable provisions of Alaska Admin. Code 18 AAC 34. I declare under penalty of unsworn falsification that this application (including any accompanying statements) has been examined by me, and to the best of my knowledge and belief is true, correct and complete.					
Printed name of applicant (owner or officer)			Signature of applicant		Date

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ACTIVITIES (Check every fishery resource, process, and packaging material you plan to purchase, process or export this year).

Fishery Resource	Process	Packaging Material
Type of fish and shellfish purchased, processed, or exported unprocessed		
<input type="checkbox"/> 1. Salmon <input type="checkbox"/> 2. Crab <input type="checkbox"/> 3. Halibut <input type="checkbox"/> 4. Herring <input type="checkbox"/> 5. Shrimp <input type="checkbox"/> 6. Sea Cucumbers <input type="checkbox"/> 7. Roe <input type="checkbox"/> 8. Scallops <input type="checkbox"/> 9. Pollock <input type="checkbox"/> 10. Black Cod/Sablefish <input type="checkbox"/> 11. Pacific Cod <input type="checkbox"/> 12. Sole <input type="checkbox"/> 13. Aquatic Plants Specify: _____	<input type="checkbox"/> 14. Other Groundfish Specify species: _____ <input type="checkbox"/> 15. Misc. Finfish Specify species: _____ <input type="checkbox"/> 16. Other fishery product Specify species: _____ <input type="checkbox"/> 1. Selling Live <input type="checkbox"/> 2. Heading/Butchering <input type="checkbox"/> 3. Recovering Roe <input type="checkbox"/> 4. Salted Roe <input type="checkbox"/> 5. Pickling <input type="checkbox"/> 6. Cooking/Water <input type="checkbox"/> 7. Cooking/Steam <input type="checkbox"/> 8. Ice Manufacturing <input type="checkbox"/> 9. Freezing <input type="checkbox"/> 10. Green Roe <input type="checkbox"/> 11. Fish Oil* <input type="checkbox"/> 12. Shelf Stable <input type="checkbox"/> 13. Salting/Brining: Wet or Dry * for human consumption only	<input type="checkbox"/> 14. Drying <input type="checkbox"/> 15. Mixing - Formulating <input type="checkbox"/> 16. Surimi <input type="checkbox"/> 17. Retorted Thermal <input type="checkbox"/> 18. Smoking: Refrigerated/ Holding <input type="checkbox"/> 19. Smoking: Frozen/Holding <input type="checkbox"/> 20. Smoking: Hot <input type="checkbox"/> 21. Smoking: Cold <input type="checkbox"/> 22. Other-Specify _____ <input type="checkbox"/> 1. Vacuum Bags <input type="checkbox"/> 2. Can <input type="checkbox"/> 3. Retort Pouch <input type="checkbox"/> 4. Glass Pack <input type="checkbox"/> 5. Waxed Box w/ Liner <input type="checkbox"/> 6. Plastic or Other Bag <input type="checkbox"/> 7. Bulk <input type="checkbox"/> 8. Hard Plastic Container <input type="checkbox"/> 9. Other Specify: _____

PRODUCT AND PACKAGING DETAILS (Use the numbers checked above to complete this section).

Fishery Resource	Process	Estimated Maximum Pounds of fishery resource used in production per day	Packaging Material used for final/finished product	Final/Finished Product Storage: <small>Refrigerated, ice, shelf-stable, frozen</small>	Check Months of Anticipated Harvest															
					January	February	March	April	May	June	July	August	September	October	November	December				
Fishery resource used in a finished product	Process used in a finished product																			

INGREDIENTS AND ADDITIVE INFORMATION (List all ingredients and additives used for any product listed above).

Brining ingredients:
Product ingredients:
Additives:
Source of ice (Name of company supplying ice):

How does the firm distribute the final product: _____

Show the percentage of products sold:

Retail _____% Wholesale _____% Intrastate _____% Interstate _____% Export _____%

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CORPORATIONS, LLC's, PARTNERSHIPS or OTHER
(List the parent corporation on the first line if applicable. List names of all corporate officers or partners of the entity applying for this permit. If you have multiple officers or partners, please submit the information on a separate page).

Parent Corporation Name (if applicable)			Federal EIN
President/Owner/Partner			Phone Number
Business Mailing Address			Fax Number
City	State	Zip	E-mail

Vice President/Owner/Partner			Phone Number
Business Mailing Address			Fax Number
City	State	Zip	E-mail

Secretary/Treasurer/Owner/Partner			Phone Number
Business Mailing Address			Fax Number
City	State	Zip	E-mail

AFFILIATED SEAFOOD PROCESSING FIRMS
(List the name(s) and address(es) of associated firms that are permitted to process seafood in Alaska. If you have more firms than will fit below, please submit the information on a separate page).

Company or Business Name			Phone Number
Business Mailing Address			Fax Number
City	State	Zip	E-mail

Company or Business Name			Phone Number
Business Mailing Address			Fax Number
City	State	Zip	E-mail

Company or Business Name			Phone Number
Business Mailing Address			Fax Number
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HARVEST AREAS (Check all that apply).

- A. Juneau, Hoonah, Elfin Cove, Yakutat, Angoon, Tenakee
- B. Ketchikan, Craig
- C. Petersburg, Wrangell
- D. Sitka, Pelican
- E. Prince William Sound
- F. EEZ _____
- H. Cook Inlet
- K. Kodiak
- L. Chignik
- M. Alaska Peninsula
- O. Dutch Harbor
- Q. Bering Sea
- R. Adak, Western Aleutians
- T. Bristol Bay
- W. Kuskokwim
- X. Kotzebue
- Y. Yukon
- Z. Norton Sound



WATER

Complete information below that is applicable to each drinking, and processing water system.
 Contact the Drinking Water program at (866) 956-7656 (outside of Anchorage), or (907) 269-7656 (in Anchorage).

Water Type	ID# or Source	Gallons/Day	Disinfectant Used	PPM	Method
Public Water System	ID#				N/A
Fresh Water – (Other than Public Water System)	Source				<input type="checkbox"/> Direct-Injection <input type="checkbox"/> Batch Vessel < 65'
Salt Water (Used for Processing)	Specific Water Body(s)				<input type="checkbox"/> Direct-Injection <input type="checkbox"/> Batch Vessel < 65'
Do you have a Daily Disinfection Log for processing water?				<input type="checkbox"/> Yes <input type="checkbox"/> No	

