



Authorization of signature(s) for Area B, Area H or Area E temporary salmon ITQ/ITE reallocation request, use of digital signature and/or designation form

TO: **FISHERIES AND OCEANS CANADA**
 Fisheries Management
 E-mail: Heather.Braun@dfo-mpo.gc.ca

I, _____ being either the owner of the M/V _____ VRN _____ (“the Vessel”) and/or the Category A licence eligibility holder, or the authorized signing authority for the Communal Commercial F or N licence holder, do hereby grant the following authorization(s) for the licence(s) indicated in Part A below:

PART A: Area B, Area H or Area E Licence Information

<i>Licence Prefix (F)AS, (F)AT, (F/N)AG</i>	<i>Licence Number</i>	<i>Fishery Sockeye ITQ and/or Pink ITQ and/or Chum ITO/ITE</i>	<i>Licence Prefix (F)AS, (F)AT, (F/N)AG</i>	<i>Licence Number</i>	<i>Fishery Sockeye ITQ and/or Pink ITQ and/or Chum ITO/ITE</i>

PART B: Signing Authorization

I do hereby give notice to Fisheries and Oceans Canada that I authorize the person(s) identified below to request and to sign on my behalf or affix a digital version of my signature to any temporary salmon ITQ/ITE reallocation request form for the Vessel and/or the above indicated licence(s) for the fishery(ies) listed.

_____ of _____, _____ and
Name of Designate (please print) *Company and/or Contact Number* *Signature of Designate*

_____ of _____, _____
Name of Designate (please print) *Company and/or Contact Number* *Signature of Designate*

I recognize and accept full responsibility for any reallocation request(s) signed by the above person(s) and/or for any reallocation request(s) to which the above person(s) have affixed my digital signature.

PART C: Designations

I do hereby authorize Fisheries and Oceans Canada to release the following document(s) for the above licence(s) for the period(s) specified to the person(s) named below:

Amendments Licence Status (LSR) Reallocation History Detail Quota Status (QSR)

_____ _____ _____
Name (please print) *Name (please print)* *Name (please print)*

PART D: Signature

_____ _____ _____
Name of licence holder (please print) *Signature* *Date (day / month / year)*

(_____) _____
Contact Phone *Email*

<i>DFO use only</i>	<i>Date Received</i>		<i>Date Verified</i>		<i>Initials</i>	
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INSTRUCTIONS FOR COMPLETING THE Authorization of Signature(s) for Area B, Area H or Area E Temporary Salmon ITQ/ITE Reallocation Request, Use of Digital Signature and/or Designation Form

PLEASE READ THIS CAREFULLY:

This form is for (a) the Authorization of Signature(s) for Temporary Salmon ITQ/ITE Reallocation Request (b) the Use of Digital Signature For Temporary Salmon ITQ/ITE Reallocation Request forms and/or (c) Designation.

Any person wishing to give authorization to another party to sign on his/her behalf;

1. a **Temporary Reallocation Request for Sockeye Salmon (Area B/H/E) or Pink Salmon ITQ (Area B&H only) Holdings** request form or;
2. a **Temporary Reallocation Request for Chum Salmon ITQ/ITE (Area B&H only) Holdings** request form or;
3. to authorize use of Digital Signature for either 1 or 2 above or;
4. to designate individual(s) to request licence amendment(s), licence status report (LSR), reallocation history detail report and/or quota status report (QSR) **must complete and sign this form**.

Should the designated signatories change at any time, a new form shall be completed in full, signed and submitted to the Salmon Quota Officer as a .pdf file by e-mail to: Heather.Braun@dfo-mpo.gc.ca. Additional forms are available from the Commercial fishing licence information website at:

<http://www.pac.dfo-mpo.gc.ca/fm-gp/licence-permis/licence-commercial-permis-eng.html>

Instructions:

Print the name of the person completing the form (Vessel owner, Category A Licence eligibility holder, or authorized signing authority for the Communal Commercial F or N licence holder) in the space indicated at the top of page one, along with the Vessel Name and VRN, and check all boxes that apply. **If you are the eligibility holder of multiple Category A licences, you may list them on this form but leave the Vessel and VRN blank.**

PART A: Indicate all the licences held on the vessel to which the authorizations and designations will apply. Under "Licence Prefix" list the licence prefix (AS, AT, AG, FAS, FAT, FAG, NAG); under "Number" list the licence number; and under "Fishery" indicate for which fishery the authorization is granted. There is room for 8 licences in part A. If you need to provide authorizations for other licences you must complete a second form.

Please note: *Authorizations given as indicated on this form, only apply for the current fishing season, although they may be cancelled at any point during the season.*

PART B: If you wish to authorize any individual(s) to request temporary salmon ITQ/ITE reallocation(s) from the vessel and licences, **either by signing on your behalf or affixing a digital version of your signature that you have provided to them**, you must complete **PART B**. Indicate whether you wish to authorize them to sign on your behalf or use a digital version of your signature by checking the appropriate box. Enter the individual(s), company affiliation (if applicable), and have them sign in the space provided. *If you do not wish to grant authorizations for signature or for use of a digital signature, leave Part B blank or strike through.*

PART C: If you wish to authorize individual(s) to request amendments, licence status reports (LSR), reallocation history detail reports, and/or quota status report (QSR), you must complete **PART C**. Please check the boxes of the reports which the authorized designate may request by printing the name(s) of the individual(s) in the space provided. *If you do not wish to grant authorizations for release of amendment, licence status report (LSR), quota status report (QSR), or reallocation history detail report, leave Part C blank or strike through.*

PART D: To complete the authorization form, **only** the Vessel owner, Category A Licence eligibility holder or authorized signing authority for the Communal Commercial F or N licence holder must complete **PART D**. In the spaces provided please print your name, sign, note the date signed, and add your contact information.

NOTE: An authorized designate **may not** complete this form and sign in **PART D**.

*Please submit in writing (and email to Heather.Braun@dfo-mpo.gc.ca) if a previously submitted **Authorization of Signature, Use of Digital Signature or Designation** is to be terminated.*

Contact Heather Braun (Quota Officer) Heather.Braun@dfo-mpo.gc.ca or 250-240-0713 with any change(s) to contact information (phone or email).

Once completed, the form should be emailed to Heather.Braun@dfo-mpo.gc.ca.

If you have questions about completing this form, please contact Resource Management: Heather Braun (Quota Officer) Heather.Braun@dfo-mpo.gc.ca, Madeline Wanless (Area B&H Resource Manager) Madeline.Wanless@dfo-mpo.gc.ca, or Lita Gomez (Area E Resource Manager) Lita.Gomez@dfo-mpo.gc.ca