



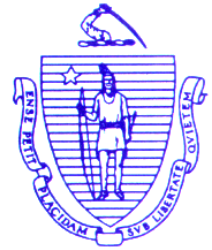
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Commonwealth of Massachusetts

Division of Marine Fisheries

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Commissioner

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Deputy Commissioner

SHORESIDE BUSINESS PRE-QUALIFICATION WORKSHEET & AFFIDAVIT FOR GROUND FISH DISASTER ECONOMIC ASSISTANCE APPLICATION

APPLICATION DEADLINE: May 31, 2015

Submit to MA DMF (c/o Samantha Andrews)
by mail at 251 Causeway St., Suite 400, Boston, MA 02114,

Accurate responses to the questions below will assist in evaluating pre-qualification for economic assistance from Phase 2 of the Commonwealth's 2012 Groundfish Disaster Economic Assistance Program. Contact Samantha Andrews with any questions by email at Samantha.n.andrews@state.ma.us or by phone at (617.626.1564)

Business Information

1. Name of Business Owner: _____
 2. Name of Business: _____
 3. Business Address: _____
 4. Mailing Address: _____
 5. Telephone Number: (____) _____ - _____ 6. Email: _____
 7. Is this business currently incorporated with a current physical place of business in the Commonwealth of Massachusetts? YES _____ NO _____
 8. Was this business incorporated with a physical place of business in the Commonwealth of Massachusetts in at least one year during Calendar Year (CY) 2009-2013? YES _____ NO _____
- If yes, which years? (please check appropriate) 2009 ____ 2010 ____ 2011 ____ 2012 ____ 2013 ____

Relation to MA Commercial Groundfishery

9. Can you document at least 30% and at least \$32,500 of your total business receipts/sales in any one year from Calendar Year 2009 – 2013 was generated from commercial vessels with limited access multispecies permits and/or state waters Groundfish Endorsements (GEs)? YES _____ NO _____

10. Was at least one of those commercial groundfish vessels qualified for 2012 Groundfish Disaster Aid (see enclosed list)? YES _____ NO _____

If yes, please provide vessel name(s): _____

11. If you answered yes to questions (7) – (10) above, please provide information on the next page regarding your commercial groundfish-related business receipts/sales for each calendar year as appropriate (no documentation is needed at this point, but may be required by DMF at a later date to fully qualify an applicant).

Business Receipts/Sales from Commercial Groundfish Fishery

Calendar Year	In \$	As % of Total Business Receipts/Sales	# of Employees
2009	\$ _____	_____ %	_____
2010	\$ _____	_____ %	_____
2011	\$ _____	_____ %	_____
2012	\$ _____	_____ %	_____
2013	\$ _____	_____ %	_____

12. Provide a brief narrative explaining how business is directly related to the commercial limited access groundfish industry impacted by the 2012 Groundfish Fishery Disaster. The explanation should include names of commercial limited access groundfish vessels with which you did direct business during any calendar year from 2009 thru 2013.

(Attach additional pages as necessary)

Signature & Affidavit

I, _____, am the current legal owner and was the legal owner on
(Print Business Owner Name)

April 30, 2014 of _____. The said business named in
(Print Name of Business)

this Affidavit did service with the commercial limited access groundfishery impacted by the 2012 Groundfish Fishery Disaster during all or a portion of the calendar year period from 2009 thru 2013 and continues to service the commercial limited access groundfishery. I certify under the pains and penalties of perjury that all the information contained in this application is true and accurate to the best of my knowledge and belief, signed this _____ day of _____, 2015 _____.

(Signature of Affiant)