DED - INVESTMENTS
Department of Commerce, Community, and Economic Development
Commercial Fishing Extension Application

Commercial Fishing Revolving Loan Fund

AS 16.10.300 – AS 16.10.370 3AAC 80.010 – 3 AAC 80.900

PROGRAM GOAL

The goal of the commercial fishing loan program is to provide long-term, low interest loans to promote the development of predominantly resident fisheries, and continued maintenance of commercial fishing vessels and gear for the purpose of improving the quality of Alaska seafood products.

Contact Information

Mail Applications To:
DED - INVESTMENTS
DCCED
P.O. Box 110802
Juneau, AK 99811-0802

By Telephone:
(800) 478-LOAN (5626) Toll Free within Alaska
(907) 465-5437 TTD

By Email:
financing@alaska.gov

In Person:

Juneau Office
State Office Building
333 Willoughby Ave. 9th Floor
Juneau, Alaska
(907) 465-2510 Office
(907) 465-2103 Fax

Anchorage Office
Robert B. Atwood Building
550 W. 7th Ave. Suite 1770
Anchorage, Alaska
(907) 269-8150 Office
(907) 269-8147 Fax

Website:
www.commerce.alaska.gov/web/ded

PERSONAL INFORMATION DISCLOSURE STATEMENT

COMMERCIAL FISHING LOAN ACT

AS 16.10.300 - AS 16.10.370 3 AAC 80.010 - 3 AAC 80.900

To apply for a loan or request action under the above program, you must complete loan application forms which require you to provide certain personal information about yourself. Your application cannot be considered without this information because it is necessary for the evaluation of your request. In the course of this process, some or all of this information may be released to other State agencies or may be subject to inspection and copying under AS 09.25.110 – AS 09.25.120. Information supplied is also governed by the appropriate regulations referenced above.

If you are aware of inaccurate or incomplete personal information that is contained in your file, you should submit a written request to the Director of the Division of Economic Development with the following information:

1. a description of the challenged personal information;
2. the changes necessary to make the personal information accurate or complete; and
3. your name and the address where we may contact you.

The Division of Economic Development, Department of Commerce, Community, and Economic Development complies with Title II of the Americans with Disabilities Act of 1990. This publication is available in alternative communication formats upon request. Please contact the Division at (907) 465-2510 or TDD (907) 465-5437 to make any necessary arrangements.

DED - INVESTMENTS
Department of Commerce, Community, and Economic Development
Commercial Fishing Extension Application

CHECK-OFF LIST		
The following information is **required** in order to process your application. Please use the list to make sure all information is submitted. **Incomplete applications will not be processed.** Retain a copy of this application for your records.		
	1	**Non-refundable Application Fee:** You must include a check or money order for $100.
	2	**Residency Questionnaire:** Complete page 2.
	3	**Letter of Request:** Complete, sign and date. (page 4)
	4	**Fishing Income History:** Complete copy of current year fish statements (to Date) must be attached. (page 6)
	5	**Bank Statement(s):** A copy of current bank statement(s) verifying cash accounts as shown on Financial Statement, Schedule No. 1, page 7.
	6	**Financial Statement:** Both sides of this form **MUST** be completed in detail. (page 7 & 8)
	7	**Actual Profit and Loss Statement:** Both sides of this form **MUST** be completed. (page 9 & 10)
	8	**Authorization to Obtain Credit and/or Release Information:** Complete, sign and date. (page 11)
	9	**Disclosure Authorization:** Under Alaska Statutes and Regulations, certain information about your loan is confidential and cannot be released without your written approval. Complete this form if you want an accountant, financial consultant, representative, or translator to have access to confidential information
	10	**Federal Tax Returns:** Submit a signed copy of your federal income tax return for the last calendar year, including all schedules and W-2's. Guarantor(s) must attach copy of their tax return for the last calendar year.
	11	**Guarantor(s):** If there is a guarantor(s) on this loan, they must submit a Financial Statement (page 15 in this packet), and a signed copy of their Federal Income tax return for the last calendar year.

List below the addresses of each place you have resided during the past three years (attach a separate sheet of paper if necessary).

From	To	Address	Landlord or Manager Name & Phone Number
		Own ☐	Rent ☐
		Own ☐	Rent ☐
		Own ☐	Rent ☐

Residency Questionnaire

Non-Residents may be approved for Commercial Fishing loan extensions only when it is in the State's best interest. If an extension is approved, interest due may not be deferred but may instead be added to the principal balance of the loan.

Definition of Resident

- Living in Alaska with the intent to remain indefinitely
- Primary and permanent home in Alaska
- Present in Alaska except for brief intervals (generally less than 90 days), for military service, education, or good cause

1. Are you currently a resident of the state of Alaska? **YES** ☐ **NO** ☐

   If no, explain why it would be in the state of Alaska's best interest to approve your request:

   _____
   _____
   _____

   If yes complete questions 2 – 7

2. When did your Alaska Residency begin? _____ Month _____ Year
   This means the month and year that you physically arrived in Alaska with the intent to remain permanently

3. Are you a United States Citizen? **YES** ☐ **NO** ☐

4. Have you been registered to vote in Alaska for the past 3 years? **YES** ☐ **NO** ☐
   If NO, Complete Question 1 on page 3

5. Have you had an Alaska driver's license for the past 3 years? **YES** ☐ **NO** ☐
   If NO, Complete Question 2 on page 3

6. Have you claimed any residency benefits in a state other than Alaska during the past 3 years? **YES** ☐ **NO** ☐
   If YES, Complete Question 3 on page 3

7. During the past 2 years were you gone from Alaska for more than 90 consecutive days? **YES** ☐ **NO** ☐
   If YES, Complete Question 4 on page 3

Supplemental Residency Questionnaire
Complete ONLY as instructed on Residency Questionnaire

During the past 3 years, in which State other than Alaska were you:

1. Registered to vote
   Please explain

   _____

   _____

   [ ] **STATE**

2. Licensed to drive
   Please explain

   _____

   _____

   [ ] **STATE**

3. Claimed residency benefits
   Please explain

   _____

   _____

   [ ] **STATE**

4. List the dates you were gone from Alaska

Use Absence Reason Codes below to fill in boxes at left

	Date Began	Date Ended	# of Days	Explanation
[ ]	_____	_____	_____	_____
[ ]	_____	_____	_____	_____
[ ]	_____	_____	_____	_____

Absence Reason Codes

A. Enrolled as a full-time student
B. On active duty as a member of U.S. Armed Forces
C. Continuous medical treatment under a doctor's care
   (Attach doctor's statement)
D. Employment requirement by the State of Alaska
E. Vacation
F. Seeking employment
G. Accompanying an eligible Alaskan resident as the resident's spouse
H. Other reasons, including business (Please explain)

LETTER OF REQUEST

Please explain the following:

1) Reasons why you cannot make the payment at this time.
Be sure to include all factors that contributed.

2) Your plan to make up the payment.
State your plan to repay in detail.

_____

_____

_____

_____

_____

_____

_____

_____

If you need additional space, please continue on the back of this form.

I certify under penalty of perjury that all information contained in this application and any attachments to it is true, accurate and complete. I am aware that the maximum penalty for perjury, a Class B felony under AS 11.56.200(c), is a fine of up to $50,000 (AS 12.55.035(b)(2)) and imprisonment for up to 10 years (AS 12.55.125(d)). I understand that if any information contained in this application is false, inaccurate, or incomplete, the Division will deny the application, my loan will be canceled and the remaining balance immediately due, and I will no longer be eligible for any future benefits under the Commercial Fishing Loan Program.

_____ _____
Signature Date

_____ _____
Signature Date

LETTER OF REQUEST - Continued

FISHING INCOME HISTORY

Name:	Date of Birth
Mailing Address	City, State, Zip Code
Telephone Number	Loan Number
Vessel Name or Collateral Description:	

Year	List **All** Fisheries You Participated in During the Last Three Seasons	District or Area Fished	**All** Permit Numbers Fished	Gross Sales* or Crew Shares From Each Fishery

*Gross Sales is defined as income before expenses. This is **NOT** the bottom line on your cannery settlement sheet.

FINANCIAL STATEMENT

ASSETS		LIABILITIES		
			Total Liabilities	Monthly Payment
Cash on Hand	$	Vessel Mortgages (Schedule 4)	$	$
Cash in Banks (Schedule 1)		Owing on Permits (Schedule 4)		
Accounts Receivables (Schedule 3)		Real Estate Mortgage (Schedule 5)		
Due from Canneries		Notes Payable (Schedule 6)		
Real Estate Owned (Schedule 5)		Owing to Canneries		
Securities (Schedule 2)		Credit Cards		
Vessels Owned (Schedule 4)		Student Loans		
Fishing Equipment		Other		
Limited Entry Permits (Schedule 4)				
Other				
TOTAL ASSETS	$	**TOTAL LIABILITIES**	$	$

SCHEDULE NO. 1: CASH ACCOUNTS

Bank/Branch	Mailing Address	Account Number	Current Balance
			$

SCHEDULE NO. 2: SECURITIES

Number of Shares	Description	Market Value	Cost	Income Received Last Year
		$	$	$

SCHEDULE NO. 3: ACCOUNTS RECEIVABLE, NOTES RECEIVABLE, MORTGAGES AND CONTRACTS OWNED

Description	Name of Debtor	Original Balance	Present Amount	Monthly Payment	Amount Past Due
		$	$	$	$

SCHEDULE NO. 4: VESSELS OWNED/PERMITS OWNED

Description/Year of Vessel or Type of Permit	Year Acquired	Cost	Present Value	Original Amount	Current Balance	Owed To	Payment Amount	When Due
		$	$	$	$		$	

SCHEDULE NO. 5: REAL ESTATE OWNED

Residence or Rental	City and State	Date Acquired	Cost	Current Assessed Value	Lender	Original Balance	Present Balance	Payment Amount
			$	$		$	$	$

SCHEDULE NO. 6: NOTES PAYABLE TO OTHERS

Name of Lender	Collateral	Date Incurred	Original Amount	Present Amount	When Due	Monthly Payment	Annual Payment
			$	$		$	$

In submitting the foregoing statement the undersigned applicant guarantees its accuracy with the intent that it be relied upon by the Division in extending credit to the applicant and warrants that information has not knowingly been withheld that might affect the applicant's credit risk; and that the applicant agrees to notify the Division immediately in writing of any material change in the applicant's financial condition. **(NOTE: IF THIS STATEMENT INCLUDES JOINTLY OWNED ASSETS, BOTH PARTIES MUST SIGN.)**

Signature _____Date _____

Signature _____Date _____

ACTUAL PROFIT AND LOSS STATEMENT

For the Period January 1, 20__ to December 31, 20__

INCOME		EXPENSES	
Gross Sales: Salmon	$	Crew	$
Halibut/Sablefish		Fuel/Groceries/Bait and Ice	
Herring		Vessel/Gear Repair	
Shrimp/Crab		Vessel Insurance	
Other Fisheries		Vessel Payment, Lease or Rent	
Crew Wages		Gear and Equipment Purchases	
Nonfishing Income - Applicant		Permit Payment	
Spouse/Co-Applicant Income		Other	
Rental Income			
Other Income			
TOTAL INCOME	$	**TOTAL FISHING EXPENSES**	$
Please verify your income with copies of your fish tickets or a cannery statement. If your income was from crewing, you may be asked to provide a signed affidavit from your skipper.		Household and Living Expenses (food, clothing, rent, education and entertainment, dues, contributions, utilities, and insurance)	$
Comments:		Real Estate Payments	
		Other Loan Payments	
		Child Support	
		Medical (including insurance premiums)	
		Other	
		TOTAL LIVING EXPENSES	$
		TOTAL EXPENSES	$

SCHEDULE NO. 1: CREW SHARES PAID

Show all crewmembers that received crew shares during the period shown on reverse side.

Name	Mailing Address	Residence Address	Amount Paid
			$
TOTAL **Total crew shares paid should agree with figure shown under expenses on reverse side.**			

SCHEDULE NO. 2: GEAR AND EQUIPMENT PURCHASES

List below all major gear and equipment purchases made during the period shown on reverse side.

Date Purchases	Type/Item	Cost
		$
TOTAL **Total purchases should agree with figure shown under expenses on reverse side.**		

AUTHORIZATION TO OBTAIN CREDIT AND/OR RELEASE INFORMATION

I authorize the Division of Economic Development to obtain information from, or release any information contained in my loan application and attachments to the following agencies:

U.S. Department of Labor
U.S. National Marine Fisheries Service
U.S. Coast Guard
Alaska Department of Fish and Game
Alaska Commercial Fisheries Entry Commission
Alaska Child Support Enforcement Division
Alaska Permanent Fund Dividend Division
Alaska Department of Public Safety
Alaska Post Secondary Education
Alaska Division of Motor Vehicles
Any Federal, State or Private Agency that can verify credit and employment history

I further authorize any individual or institution to release credit information concerning me to the Division of Economic Development. This authorization is given to enable the Division of Economic Development to evaluate my loan request. Verification may be obtained from any source named in this application and from any credit-reporting agency. I understand additional information may be requested as part of the quality control program at any time during the lending process.

It is understood that a photocopy of this form will serve as authorization.

Applicant's Signature:	Co-Applicant Signature:
Please Print Name:	Please Print Name:
Social Security Number:	Social Security Number
Date:	Date:

COMMERCIAL FISHING LOAN EXTENSION APPLICATION
DISCLOSURE AUTHORIZATION

Under Alaska Statutes and Regulations certain information about your loan is confidential and cannot be released without your written approval. Confidential information may include personal and financial details.

Do you want confidential information released to anyone assisting you in applying for a loan payment extension or other financial arrangements?

☐ Yes, Confidential information may be released to:

☐ No, Do not release confidential information to anyone at this time.

_____
Print Name

_____
Mailing Address

_____
City, State Zip Code

_____
Telephone Number

To cancel this disclosure authorization, you must notify the Director of this Division in writing.

_____ _____ _____
Print Name Signature Date

_____ _____ _____
Print Name Signature Date

_____
Loan Number

FINANCIAL STATEMENT FOR GUARANTOR

ASSETS		LIABILITIES		
			Total Liabilities	Monthly Payment
Cash on Hand	$	Vessel Mortgages (Schedule 4)	$	$
Cash in Banks (Schedule 1)		Owing on Permits (Schedule 4)		
Accounts Receivables (Schedule 3)		Real Estate Mortgage (Schedule 5)		
Due from Canneries		Notes Payable (Schedule 6)		
Real Estate Owned (Schedule 5)		Owing to Canneries		
Securities (Schedule 2)		Credit Cards		
Vessels Owned (Schedule 4)		Student Loans		
Fishing Equipment		Other		
Limited Entry Permits (Schedule 4)				
Other				
TOTAL ASSETS	$	**TOTAL LIABILITIES**	$	$

SCHEDULE NO. 1: CASH ACCOUNTS

Bank/Branch	Mailing Address	Account Number	Current Balance
			$

SCHEDULE NO. 2: SECURITIES

Number of Shares	Description	Market Value	Cost	Income Received Last Year
		$	$	$

SCHEDULE NO. 3: ACCOUNTS RECEIVABLE, NOTES RECEIVABLE, MORTGAGES AND CONTRACTS OWNED

Description	Name of Debtor	Original Balance	Present Amount	Monthly Payment	Amount Past Due
		$	$	$	$

SCHEDULE NO. 4: VESSELS OWNED/PERMITS OWNED

Description/Year of Vessel or Type of Permit	Year Acquired	Cost	Present Value	Original Amount	Current Balance	Owed To	Payment Amount	When Due
		$	$	$	$		$	

SCHEDULE NO. 5: REAL ESTATE OWNED

Residence or Rental	City and State	Date Acquired	Cost	Current Assessed Value	Lender	Original Balance	Present Balance	Payment Amount
			$	$		$	$	$

SCHEDULE NO. 6: NOTES PAYABLE TO OTHERS

Name of Lender	Collateral	Date Incurred	Original Amount	Present Amount	When Due	Monthly Payment	Annual Payment
			$	$		$	$

In submitting the foregoing statement the undersigned applicant guarantees its accuracy with the intent that it be relied upon by the Division in extending credit to the applicant and warrants that information has not knowingly been withheld that might affect the applicant's credit risk; and that the applicant agrees to notify the Division immediately in writing of any material change in the applicant's financial condition. **(NOTE: IF THIS STATEMENT INCLUDES JOINTLY OWNED ASSETS, BOTH PARTIES MUST SIGN.)**

OATH	
I understand and agree that if I submit any false, inaccurate, or incomplete information in this application and attachments, I will be subject to the following:	
My application will be denied.	
If I receive a loan based on the false, inaccurate, or incomplete information, and this information is disclosed in the future, the loan will be canceled and immediately payable.	
I will no longer be eligible for future benefits under the Commercial Fishing Revolving Loan Fund	
I certify under penalty of perjury that all the information provided in this application and attachments is true, accurate and complete. I am aware that the maximum penalty for perjury, a Class B felony under AS 11.56.200(c), is a fine of up to $50,000 (AS 12.55.035(b)(2)) and imprisonment for up to 10 years (AS 12.55.125(d)).	
Applicant's Signature:	Date:
Applicant's Signature:	Date:

Acknowledgment

State of Alaska)
) ss.
_____ Judicial District)

The foregoing instrument was acknowledged before me this _____ day of _____, 20 _____

By (Name of person(s) who acknowledged): _____

APPLICANT'S PRINTED NAME(s)

_____
Notary Public/Postmaster

My Commission Expires: _____