

TA# _____
STATE CDQ CONTACT USE

CDQ Technical Amendment Form

Submission of this form must include:

1. CDP text redlined to show deletions and shaded to show additions.
2. CDP replacement pages with revision dates.
3. A completed NMFS fishing plan form for proposed vessel and processor additions (only required for vessels harvesting groundfish CDQ).

Section A. CDQ GROUP INFORMATION

NUMBER OF COPIES ATTACHED INCLUDING COVER LETTER _____

1. CDQ Group: _____

2. Description of technical amendment: _____

3. CDQ Group Representative: _____ Date: _____

4. Fax # _____ 5. Phone # _____

Section B. STATE OF ALASKA NOTICE OF RECEIPT

1. CDQ Contact: _____ Date: _____

2. Fax # _____ 3. Phone # _____

4. Date Forwarded to NMFS: _____

Section C. NOTICE OF NMFS RECEIPT AND APPROVAL

1. CDQ Coordinator: _____ Date: _____

2. Fax # _____ 3. Phone # _____

4. Date sent: to CDQ group _____ to State _____