

Kay Ivey GOVERNOR

Christopher M. Blankenship COMMISSIONER

Edward F. Poolos DEPUTY COMMISSIONER

STATE OF ALABAMA DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES MARINE RESOURCES DIVISION

POST OFFICE BOX 189 DAUPHIN ISLAND, ALABAMA 36528 TEL (251) 861-2882 FAX (251) 861-8741 marine.resources@dcnr.alabama.gov

Our mission is to manage the State's marine fishery resources through research, enforcement, and education for the maximum benefit of the resources and the citizens of Alabama.



June 28, 2021

Dear Valued Commercial Seafood Related Business:

The Alabama Marine Resources Division (AMRD) of the Alabama Department of Conservation and Natural Resources (DCNR) was recently authorized to begin receiving applications for a second round of funding available under the Consolidated Appropriations Act of 2021 to support activities previously authorized under Section 12005 of the *Coronavirus Aid, Relief, and Economic Security Act* (CARES Act) to eligible participants. This program was developed to assist Alabama in overcoming economic losses in its marine fishing industry. Those engaged in commercial fishing, seafood processing, non-retail seafood dealers, live-bait dealers, oyster aquaculture, seafood aquaculture and commercial party boats (charter for-hire) are encouraged to apply.

In order to be eligible for the reimbursement program, qualifying fishery-related businesses must have experienced revenue losses as a result of the COVID-19 pandemic (between March 1, 2020 and December 31, 2020), greater than 35% as compared to their average revenue, for the same time period, earned in the preceding five years (2015-2019). Applicants must have been in business in 2019. Only Alabama residents that are licensed as: saltwater commercial fishermen (i.e., those that possess licenses for fishing, taking/catching of oysters, taking/carrying shrimp, gill net fishing, and "crab catching"), seafood or oyster aquaculture operators, non-retail seafood dealers or processors, live-bait dealers, or for-hire vessel owners/operators are eligible to participate in the program. These individuals and businesses must be able to substantiate their income reduction and complete the application process which includes a Self-Certification and Assurances affidavit adapted by AMRD. Applicants holding more than one eligible license may submit an application by individual license or in aggregate.

The available federal allocation to Alabama participants is \$2,948,417.00. Due to the limited amount of funding, the combined need of eligible applicants in our state may far exceed the funds available for disbursement. Therefore, the proportion of funds available to each applicant will be determined once all applications are reviewed.

All interested parties must submit an application available at https://www.outdooralabama.com/CARES-ACT
Please review the requirements carefully to determine whether or not you or your business meet the minimum requirements. Your completed application; signed and notarized affidavit, along with supporting documentation for damages/losses incurred must be returned to the MRD Gulf Shores office with a postmark date no later than Friday, August 6, 2021 to be considered for review. It is recommended that application

packages be sent via registered mail with a delivery confirmation. MRD will not be responsible for lost or late application packages. Hand delivered applications will ONLY be accepted at the Gulf Shores office and they must be delivered no later than 5:00 P.M. August 6, 2021. Electronic copies of applications will **NOT** be accepted.

If your CARES Act Round 1 application submitted to AMRD was approved and you received an award payment you may be eligible for an additional payment from these funds. You may apply in one of two ways.

- 1. You may request MRD re-submit your initial Round 1 application without any additional damage assessment. MRD will use the same method for calculating Round 2 disbursements as in Round 1 but the disbursements will be based on the latest number of applicants and total of damages requested. The attached resubmission request form, as well as a newly signed affidavit and self-certification form, must be completed, notarized and returned to AMRD by the deadline.
- 2. You may submit a new CARES-2 application and include your damage calculation based on the longer time period for eligible losses.

Total payments of any assistance may not total more than 100% of your damage determination <u>or your average annual revenue from the previous 5-year period</u>.

AMRD will review applications for eligibility and the Gulf States Marine Fisheries Commission (GSMFC) will dispense payments and an Internal Revenue Service Form 1099MISC to award recipients. Please be aware that funds received from this program are subject to any applicable state and federal tax obligations. Furthermore, auditors are expected to audit records of those who receive awards, and as such, all documentation/records must be retained for no less than three (3) years after the close of the Gulf State Marine Fisheries Commission grant. Feel free to contact me at (251) 861-2882 if you have questions concerning this application. Thank you for your timely attention to this matter.

Sincerely,

M. Scott Bannon, Director

Alabama Marine Resources Division

| information and return to MRD. | |
|-------------------------------------------------------------------------------|------------------------------------------|
| Name on original application: | |
| FEIN or SSN: | |
| Type of Business: | |
| Mailing Address | |
| Mailing City : | _ Mailing State Mailing Zip |
| Phone Number () | Fax Number () |
| Email: | (REQUIRED For Electronic Funds Transfer) |
| Payment type: Check Electron | nic fund transfer |
| For electronic fund transfer only | |
| Bank routing number: | |
| Bank account number: | |
| Account type: Personal Busi | iness |
| Documentation verifying the above claim An IRS Form 1099MISC will be issued t | |
| | Signature |
| Sworn and submitted before me on this | day of, 20 |
| Affix Seal or Stamp Here | Notary Public |
| | My Commission Expires |

Applicants who wish to have MRD use a previously approved CARES ACT submission shall fill out the below



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Alabama Coronavirus Aid, Relief and Economic Security (CARES) Act

Eligibility Requirements:

All applicants wishing to participate in the seafood businesses assistance program <u>MUST MEET AND PROVIDE PROOF FOR EACH</u> OF THE FOLLOWING REQUIREMENTS:

- 1. Funding is only available to validly licensed Alabama resident businesses or individuals in the following categories: saltwater commercial fishing, seafood processing, non-retail seafood dealers, live bait dealers, oyster aquaculture, seafood aquaculture (covered by Section 12005 of the CARES Act. Not all seafood aquaculture is covered by Sec 12005 (e.g. salmon). Privately owned aquaculture businesses growing products in state or federal marine waters of the United States and the hatcheries that supply them are eligible for Sec. 12005 funding. This includes all molluscan shellfish and marine algae. Non-salmonid marine finfish grown in marine waters not covered by USDA are eligible for Sec. 12005 funding) and commercial party boats (charter for-hire), or an Alabama resident with a valid saltwater commercial license from another eligible state.
- 2. Applicants must provide proof of having been a valid Alabama resident or resident business between March 1, 2020 through December 31, 2020 and for the time period used to determine financial loss (up to 5 years). Residency is primarily determined by an individual's driver's license but may also be demonstrated by providing the following: previous year tax return (mailing address only), voter registration card, home property tax, health insurance forms with address, last three months of a utility bill with address, certificate of employment, if containing proof of permanent residency, or other legal documents that may establish residency after approval by Alabama Department of Conservation and Natural Resources (ADCNR)
- 3. Applicants must provide proof that their business was operational March 1, 2020 through December 31, 2020. Examples of acceptable proof of business include-valid seafood dealer license(s), applicable business license(s), Alabama Commercial Party Boat license, saltwater commercial fishing license(s), or other applicable documents.
- 4. Applicants must prove they suffered a financial loss greater than 35%, as compared to the prior 5-year average revenue, or number of years in operation if less than 5, for the same time period (March 1 December 31), or any negative impacts to subsistence, cultural, or ceremonial fisheries. Applicant must have a minimum of one year of eligibility and have been in business or participating in an eligible fishery during the March-December eligibility period of the 2019 calendar year.
- 5. Applicants must certify that the amount of loss reflects <u>only</u> unreimbursed losses. Losses covered by insurance or through another federal assistance program must be deducted from award request. Total awards from all assistance programs and insurance payments cannot exceed 100% of identified losses.
- 6. All applicants will be required to sign a notarized affidavit verifying that all submitted documents are true and correct. Individuals/Businesses failing to meet any of the above requirements at the time of application submission may not be permitted to participate in this program.



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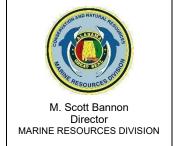
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Documentation of Financial Losses:

Applicants seeking aid <u>MUST PROVIDE</u> **one or more** of the documents below showing unreimbursed financial loss during March 1, 2020 – December 31, 2020, related to the COVID-19 pandemic.

- 1. Filed Alabama Income Tax forms-must show the specific time period covered. Generally, this is not the preferred method to determine eligibility.
- 2. Notarized letter from a Certified Public Accountant (CPA) documenting loss
- 3. Sales transactions or receipts
- 4. Shipping and receiving documents
- 5. Seafood Landing Reports (can be for multiple states)
- 6. Accounting software reports
- 7. Copies of appointment calendars (charter for-hire)
- 8. Booking system reports (charter for-hire)
- 9. Other documents as approved by AMRD



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Alabama Coronavirus Aid, Relief and Economic Security (CARES) Application

Must be post marked no later than Friday, August 6, 2021.

AMRD is not responsible for lost or misdirected applications.

Hand delivered applications will only be accepted at the Gulf Shores Marine Resources office.

Amendments to applications will not be accepted after August 6, 2021

Submit To:

| US Postal Service: | Common Carrier: (FedEx, UPS, etc) |
|--------------------------|-----------------------------------|
| Alabama Marine Resources | Alabama Marine Resources |
| Attn: Nicole Beckham | Attn: Nicole Beckham |
| PO Drawer 458 | 999 Commerce Drive |
| Gulf Shores, AL 36547 | Gulf Shores, AL 36542 |

| Name | | | |
|--------------------|----------------|-------------------------------|--------|
| FEIN or SSN | | | |
| Type of Business | | | |
| Owner or President | | | |
| Mailing Address | | | |
| Mailing City | Mailing State | Mailing Zip | |
| Physical Address | | | |
| Physical City | Physical State | Physical Zip | |
| Phone Number () | Fax Number (|) | |
| Email: | (RE | QUIRED For Electronic Funds T | ransfe |

Financial Loss Calculator

Please provide the following information below concerning financial losses incurred as a direct or indirect result of the COVID-19 Pandemic from March 1, 2020 through December 31, 2020. Revenue loss must be greater than 35% of average income for the same time period in previous 5 years or number of years you have been in business, if less than 5 years. Applicant must have a minimum of one year of eligibility and have been in business or participating in an eligible fishery during the March-December eligibility period of the 2019 calendar year.

CONFIDENTIAL

| Name: | |
|--------------------------------------------------|-----------------------------------|
| FEIN or SSN: | |
| Average income for 3/1-12/31 for previous 5 year | rs: Year 1 \$ |
| | Year 2 \$ |
| | Year 3 \$ |
| | Year 4 \$ |
| | Year 5 \$ |
| | Total \$ |
| Total \$÷ No. of Years | = Average \$ |
| Income for 3/1/202 | 20 – 12/31/2020: \$ |
| | Total loss \$ |
| Have you applied for other federal reimbursemen | t for this damage? Yes () No () |
| Amount paid by oth (Federal or Insurance) | ner programs: \$e |
| Requested loss for | this application: \$ |
| Payment type: Check Electronic fund | d transfer |
| For electronic fund transfer only | |
| Bank routing number: | |
| Bank account number: | |
| Account type: Personal Business | |

Documentation verifying the above claims \underline{MUST} be included with application. An IRS Form 1099MISC will be issued to all award recipients.

AFFIDAVIT OF DISCLOSURE AND RELEASE OF LIABILITY

| Please print clearly | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|
| STATE OF | - | | |
| COUNTY | | | |
| Ι, | | , having been d | luly sworn, |
| | | cial fisherman, or authorized representative of | of applicant |
| License type: | | | |
| | | | |
| Security Act " are true and correct and that through this grant program that would prove that those documents may be subject to real Alabama, the Alabama Department of Condition, and any and all of its employees | at no reimburs vide combined eview. I herebonservation and agents, fires, employees, | the "Alabama Coronavirus Aid, Relief and sed or pending federal claim(s) exist for clamonies greater than my proposed loss and by release, hold harmless, and indemnify, the Matural Resources, the Alabama Marine from and against any damages, loss, or liability or agents, may suffer as a result of my or my | nim(s) filed understand he State of Resources ility of any |
| | | Signature | |
| Sworn and submitted before me on this | day of | , 20 | |
| Affix Seal or Stamp Here | | Notary Public | |
| | | My Commission Expires | |



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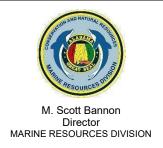
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Eligible Fishery Participant COVID-19 Related Losses Self-Certification and Assurances

I hereby request federal assistance from the Department of Commerce (DOC), National Oceanic and Atmospheric Administration (NOAA), National Marine Fisheries Service; through the Alabama Department of Conservation and Natural Resources, Marine Resources Division (ADCNR/MRD).

As the Organization's Authorized Representative, I self-certify and attest that (initial each statement below):

| This organization is a Fishery Participant that is an eligible recipient of assistance under the |
|----------------------------------------------------------------------------------------------------------------------------------------------|
| Consolidated Appropriations Act (CAA), 2021, Pub. L. 116-260; |
| Direct payments will not be directed to minors; |
| Funds will not be used to compensate state, local, or tribal governments for lost municipal or government tax revenue; |
| Funds will be used to address fishery-related direct or indirect losses or subsistence/cultural/ceremonial impacts; |
| The Fishery Participant applying for assistance is: (initial only if all statements below are true)not De-barred; |
| not on the government "do not pay list" |
| in good standing with the Federal and State Government |
| Complete if you are applying for assistance due to negative impacts to subsistence, cultural, or ceremonial fisheries: |
| Details regarding negative impacts: |
| |
| |
| |
| |

Should the fishery participant receive Consolidated Appropriations Act, 2021 assistance to mitigate the effects of the novel coronavirus (COVID-19) as allowed under Section 12005 of the CARES Act, the sum of these funds combined with funds previously received under CARES Act PL 116-136, and any additional COVID-19 related Federal financial assistance and/or any traditional fishing revenue will not exceed the average annual revenue earned across the previous 5 years.

Should the fishery participant receive assistance to mitigate the effects of the novel coronavirus (COVID-19) as allowed under CAA, Pub. L. 116-260, other financial assistance received will not be used to support or fund any portion of the scope of work incorporated into this DOC CARES Act assistance. The DOC will not pay for costs that are funded by other sources.

Five Year Averages must be calculated using 2015-2019. If an entity has not been in operation for 5 years, please use the comments section to provide clarification of the average used to calculate eligibility.

By signing this affidavit and applying for assistance as allowable under P.L. 116-260 the fishery participant attests to having documentation/records to support the losses recorded on this form, and that were used as the basis of eligibility. Further, the eligible fishery participant agrees to maintain these records for a period of no less than 3 years after the close of the primary grant award. Records must be made available upon request from Gulf States Marine Fisheries Commission, ADCNR/MRD, NOAA, or the Office of the Inspector General.

This form must accompany any application for economic assistance, as allowable under P.L. 116-136 section 12005.

| The information provided on this document is correct to the best of my knowledge. | | | |
|-----------------------------------------------------------------------------------|---------------------------------|------|--|
| Authorized Representative | Fisheries Participant Signature | Date | |
| Last Authorized Representative | First (Please Print) | MI | |



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Application Checklist

- o Completed application
- Copies of Licenses for Eligible Fishery/Activity
- Financial Loss Calculator
- Financial loss supporting documents
- Signed Affidavit
- Self-certification and Assurances form
- o Completed W-9 form