



RHODE ISLAND

DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

DIVISION OF MARINE FISHERIES

Three Fort Wetherill Road
Jamestown, Rhode Island 02835

Federal CARES Act -- Fisheries Disaster Assistance Affidavit and Application for Eligible Fishery Participants from Rhode Island

DRAFT FOR REVIEW PURPOSES

This form serves as both an Affidavit and an Application for Assistance from the Rhode Island Department of Environmental Management to compensate for losses in economic revenue incurred in 2020 due to the coronavirus pandemic. This form must be completed in full and hand delivered during the application period to either of the following RIDEM Offices during regular business hours (M-F, 8:30 am–4:00 pm). No applications will be accepted after the close of the application period.

Division of Marine Fisheries, 3 Fort Wetherill Road, Jamestown, RI 02835 (401-423-1923)

Division of Coastal Resources, 301 Great Island Road, Narragansett, RI 02882 (401-783-5551)

Section 1

Applicant Information

Name: _____
First *Last* *M.I.* *Suffix (Jr., Sr., etc.)*

Mailing Address: _____
Street Address *Apartment/Unit #*

City *State* *ZIP Code*

Phone: _____ Email: _____

Social Security Number: _____

Is the mailing address provided above also your actual place of residence? YES NO
If no, please provide your actual place of residence below.

Address: _____
Street Address *Apartment/Unit #*

City *State* *ZIP Code*

Are there any other phone numbers or email addresses that would be suited for contacting you regarding this application? If so, provide below:

Please provide the following information, as applicable to your particular sector:

Seafood Processors/Dealers

Business Name: _____

State Dealer License Number: _____

Federal Dealer Permit Number (if applicable): _____

Commercial Fishing*

Vessel Name: _____

State/Coast Guard Registration #: _____

Federal Permit (if applicable): _____

RI Commercial Fishing License Number: _____

RI Commercial Fisherman Name: _____

*vessel owners please complete all fields; shore fishermen please complete license number and name fields

Aquaculture

CRMC Assent Numbers: _____

RIDEM Aquaculture License Number: _____

Business Name (if different than applicant name): _____

Business Partner(s) or Lease Co-owner(s) (if applicable):

Party and Charter

Vessel (Coast Guard/State) Registration #: _____

Business Name (if different than applicant name): _____

Charter or Head Boat Operation: _____

Federal Permit (if applicable): _____

Vessel Name(s): _____

Eligibility – Participant Status

I self-certify and attest that (initial each statement below):

_____ I am a resident of the State of Rhode Island.

_____ I am 18 years of age or older.

_____ I am the owner of a business that was engaged in one of the fishery sectors listed below between March 1 and May 31 during one or more years over the five-year period 2015-2019.

Check the ***one*** box that applies. If eligible in more than one sector, check this box and submit a separate application for each sector

- Commercial Fishing
- Commercial Aquaculture
- Seafood Processor/Dealer
- For Hire (Party/Charter Fishing)

Eligibility – Revenue Loss

Eligibility pertains solely to your losses in revenue during the March 1 – May 31 period in 2020 relative to your average revenue earned during the same 3-month period over the prior 5 years (2015-2019).

I self-certify and attest that between March 1 and May 31, 2020 I incurred documented fishery-related revenue losses of at least 35% relative to average fishery-related revenues earned during the same 3-month period over the prior five years (2015-2019), or portion thereof if fishery-related revenues did not encompass entire 5-year period. [Percentage provided in Section 2, Part D of this application must be greater than 35% to support this representation.]

_____ (initial)

Section 2

Quantification of Revenue Loss

Average prior-year revenue must be calculated based on the five-year period 2015-2019, using the March-May period for each year. Therefore, if you were in operation in the applicable fishery sector between March 1 and May 31 during the past five years, you must check all five boxes below.

If you were not in operation in the applicable fishery sector between March 1 and May 31 during all five years, check the applicable boxes below for the years you were active, during the March-May period, and use the comments section in this application (Section 4) to provide clarification of the years used to calculate your average prior-year revenue.

- 2015
- 2016
- 2017
- 2018
- 2019

I self-certify and attest that:

A. Over the past five (5) years (or subset thereof based on the information provided above), during the period between March 1 and May 31, my average fishery-related revenue, was:

\$ _____,

B. My fishery-related revenue during the period between March 1 and May 31, 2020 was:

\$_____.

C. My loss in fishery-related revenue during the period between March 1 and May 31, 2020 was:

\$ _____
[insert average prior-year revenue amount from Part A]

minus \$ _____
[insert current-year revenue amount from Part B]

= \$ _____

D. My percentage loss in fishery-related revenue during the period March 1 – May 31, 2020 was:

\$ _____
[insert amount of March-May 2020 revenue loss from Part C]

divided by \$ _____
[insert average prior-year revenue amount from Part A]

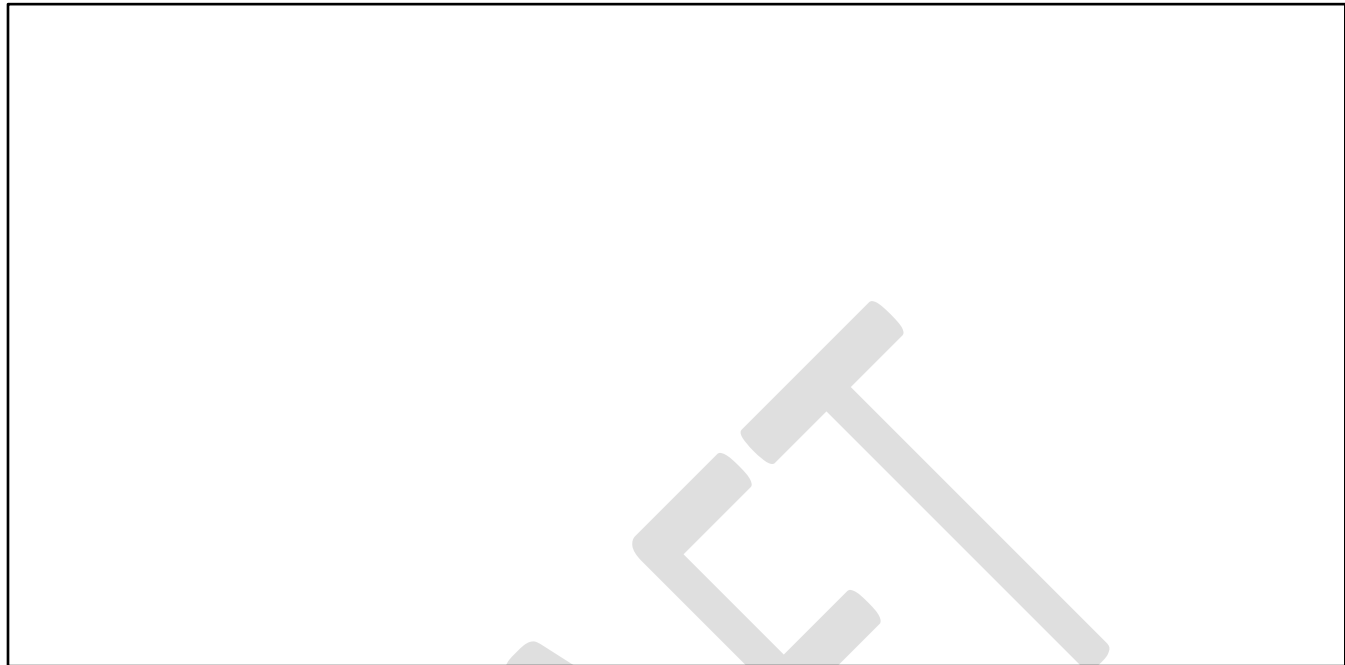
multiplied by 100 = _____%.

Documented and Verifiable Basis for Revenue Loss

Data used to calculate revenue loss must be documented and verifiable. Documented means that you have your records on hand. Verifiable means that your records, upon request and examination by the State of Rhode Island, NOAA, or the Office of the Inspector General, comport with your loss in fishery-related revenue, as set forth above in Section 2.

All documented and verifiable data must be provided to RIDEM with the submission of this affidavit and application. Such data includes, as applicable: SAFIS data, VTRs, dockside sales reports, HACCP reports, and any other data/information that supports your claim. SAFIS data, as well as any other data sought from RIDEM, such as VTRs or dockside sales reports, must be requested from RIDEM *prior* to the submittal of this affidavit and application. Data cannot be requested through this affidavit and application.

I self-certify and attest that my loss in fishery-related revenue, as set forth above in Section 2, is based on the following documented and verifiable data source(s) (*list all that apply*):



Below are sector-specific examples highlighting the information and calculations that are most applicable to verify losses.

Commercial Fishing

Average revenue during the baseline period (March 1 – May 31, 2015-2019): $AvgR = (\text{total ex-vessel value}) / 5$ (or number of years active)

Revenue during the qualifying period (March 1 – May 31 2020): $R = \text{total ex-vessel value}$

Fishery Loss: $F = AvgR - R$

Percent Loss = $(F / AvgR) * 100$

Example:
SAFIS dealer reports show:

| Year | Ex-vessel value |
|------|-----------------|
| 2015 | \$10,000 |
| 2016 | \$15,000 |
| 2017 | \$18,000 |
| 2018 | \$19,000 |
| 2019 | \$25,000 |
| 2020 | \$8,500 |

Then,
 $AvgR = (10,000 + 15,000 + 18,000 + 19,000 + 25,000) / 5$ years active
 $AvgR = 87,000 / 5 = \$17,400$
 $R = \$ 8,500$
 $F = \$17,400 - \$8,500 = \$8,900$
Percent Loss = $(8,900 / 17,400) * 100 = 51.14\%$ loss

Seafood Processor/Dealer

Average revenue during the baseline period (March 1 – May 31, 2015-2019): AvgR = (market value of seafood purchased* - ex-vessel value) / 5 (or number of years active)

**if market value is not available a multiplier can be used that is peer approved in literature; e.g., www.cfrfoundation.org/economic-impact-of-fisheries-in-rhode-island*

Revenue during the qualifying period (March 1 – May 31, 2020): R = total market value of seafood purchased - total ex-vessel value

Fishery Loss: F = AvgR - R

Percent Loss = (F / AvgR) * 100

Example:

| Year | Market Value | Ex-vessel value |
|------|--------------|-----------------|
| 2015 | \$32,500 | \$10,000 |
| 2016 | \$48,000 | \$15,000 |
| 2017 | \$57,600 | \$18,000 |
| 2018 | \$60,800 | \$19,000 |
| 2019 | \$80,000 | \$25,000 |
| 2020 | \$20,000 | \$8,500 |

Then,

AvgR = ((32,500 - 10,000) + (48,000 - 15,000) + (57,600 - 18,000) + (60,800 - 19,000) + (80,000 - 25,000))/5 years active

AvgR = 191,900 / 5 = \$38,380

R = \$(20,000 - 8,500) = \$11,500

F = \$38,380 - \$11,500 = \$26,880

Percent Loss = (26,880/38,380) * 100 = 70.03% loss

Aquaculture

Average revenue during the baseline period (March 1 – May 31, 2015-2019): AvgR = total farmgate value / 5 (or number of years active)

Revenue during the qualifying period (March 1 – May 31, 2020): R = total farmgate value

Farm Loss: F = AvgR - R

Percent Loss = (F / AvgR) * 100

Example:

HACCP reports and/or financial records show:

| Year | Farmgate value |
|------|----------------|
| 2015 | \$4,000 |
| 2016 | \$10,000 |
| 2017 | \$18,000 |
| 2018 | \$19,000 |

| | |
|------|----------|
| 2019 | \$20,000 |
| 2020 | \$3,400 |

Then,

$$\text{AvgR} = (4,000 + 10,000 + 18,000 + 19,000 + 20,000) / 5 \text{ years active}$$

$$\text{AvgR} = 71,000 / 5 = \$14,200$$

$$R = \$3,400$$

$$F = \$14,200 - \$3,400 = \$10,800$$

$$\text{Percent Loss} = (10,800 / 14,200) * 100 = 76.06\% \text{ loss}$$

Party and Charter

Annual average revenue during the baseline period (March 1 – May 31, 2015-2019): AvgR = [(Total Trips) / 5 (or number of years active)] * [(Annual Average Passenger Capacity) / 5 (or number of years active)] * \$106.75

Note: \$106.75 is drawn from Lovell et al. (2020)

Revenue during the qualifying period (March 1 – May 31, 2020):

$$R = \text{Total Trips in 2020} * \text{Average Number of Passengers per 2020 Trip} * \$106.75$$

For-Hire Loss: F = AvgR - R

$$\text{Percent Loss} = (F / \text{AvgR}) * 100$$

Example:

VTRs, or other records maintained by applicant, indicate:

| Year | Total Trips | Average Head Boat Passengers* |
|---------------|-------------|-------------------------------|
| 2015 | 10 | 71 |
| 2016 | 12 | 68 |
| 2017 | 14 | 70 |
| 2018 | 16 | 45 |
| 2019 | 16 | 50 |
| Avg 2015-2020 | 13.6 | 60.8 |
| 2020 | 2 | 15 |

*Average passengers for charter boats will be assumed six.

Then:

$$\text{AvgR} = 13.6 * 60.6 * \$106.75 = \$87,979.08$$

$$R = 2 * 15 * \$106.75 = \$3,202.50$$

$$F = \$87,979.08 - \$3,202.50 = \$84,776.58$$

$$\text{Percent Loss} = (84,776.58 / 87,979.08) * 100 = 96.36\% \text{ loss}$$

Section 3

Amount of Claim

A. I self-certify and attest that I (check the box that applies):

- Have
- Have Not

received other form(s) of assistance in the form of direct payments to cover COVID-19-related financial impacts.

Such direct payments include, but are not limited to, unemployment insurance, forgivable Payroll Protection Program loans, and any/all other forms of financial assistance, received by the applicant prior to the submission of this application, that are not subject to repayment.

B. For all applicants that **have** received assistance in the form of direct payments to cover COVID-19-related financial impacts prior to the submission of this application:

I self-certify and attest that:

1. The total amount received was \$ _____.
2. My net loss in fishery-related revenue during the period March 1 – May 31, 2020 is:

\$ _____
[insert amount from Section 2, Part C]

minus \$ _____
[insert amount from Section 3, Part B1]

= \$ _____.

The amount of my claim for federal fisheries disaster assistance, pursuant to this application is:

\$ _____
[enter amount from Section 3, Part B2.]

- C. For all applicants that *have not* received assistance in the form of direct payments to cover COVID-19-related financial impacts prior to the submission of this application:

I self-certify and attest that:

The amount of my claim for federal fisheries disaster assistance, pursuant to this application is:

\$ _____
[enter amount from Section 2, Part C].

Section 4

Comments

Please use the space below to provide any comments relative to your application.

Section 5

Notification

RIDEM will notify all applicants regarding the Department's decision regarding their application. That notification will be in the form of a Letter of Eligibility. Upon receipt of that letter, applicants will have a firm 15-day period during which they may appeal the Department's decision. Given the importance of timely notification, select one of the following three options for how you wish to be notified (*initial your preferred option*):

_____ Notify me via certified mail

_____ Call me when my letter is ready. I will pick-it up within three (3) days at RIDEM's Division of Marine Fisheries, 3 Fort Wetherill Road, Jamestown, RI during regular business hours (M-F 8:30 am - 4:00 pm)

_____ Call me when my letter is ready. I will pick it up within three (3) days at RIDEM's Division of Coastal Resources, 301 Great Island Road, Narragansett, RI during regular business hours (M-F 8:30 am - 4:00 pm)

Section 6

Confidentiality

Information provided to RIDEM via this application process will be kept confidential, except for any information that may be subject to disclosure, upon request, pursuant to the RI Public Records Act. Information or documentation pertaining to social security numbers, income and landings is not subject to such disclosure.

Information pertaining to final award amounts, along with names, addresses, and social security numbers – and only that specific information – will be made available to the Rhode Island Department of Revenue, Division of Taxation.

Information pertaining to final award amounts, along with names, addresses, and social security numbers – and only that specific information – will be provided to the Atlantic States Marine Fisheries Commission for the purpose of issuing direct-aid payments, which will be accompanied by 1099 forms.

Section 7

Certification and Consent

By completing, initialing and signing this affidavit and applying for assistance as allowable under the federal CARES Act (P.L. 116-136), the fishery participant:

- A. Certifies and attests that the sole purpose of the assistance is to mitigate the effects of the novel coronavirus (COVID-19) as allowed under Section 12005 of the CARES Act.
- B. Certifies and attests that if assistance is provided via this application for federal fisheries disaster relief, the sum of these funds combined with any additional COVID-19-related Federal financial assistance, in the form of direct payment(s), and/or any traditional revenue, will not exceed the average fishery-related revenue earned across the previous five (5) years during the period between March 1 and May 31. Assistance received may not cover costs funded by other sources.
- C. Certifies and attests to having the documentation/records to support the losses recorded on this form, and that were used for the basis of eligibility. Further, the eligible fishery participant agrees to maintain these records for a period of no less than three (3) years after the receipt of payment made pursuant to this application, and agrees to make these records available upon request from the State of Rhode Island, NOAA, or the Office of the Inspector General.
- D. Consents to allowing RIDEM to use SAFIS data, VTRs, dockside sales reports, and CRMC Aquaculture Questionnaires, as applicable, to verify the information contained in this application.
- E. Certifies and attests to being in good standing with the RI Department of Revenue, Division of Taxation regarding to RI state tax obligations.
- F. Certifies and attests under the penalty of perjury that the information contained herein is true and accurate, to the best of my knowledge.

Applicant Signature

Date

Last

First

MI

Applicant Name (Please Print)

STATE OF RHODE ISLAND

COUNTY OF _____

In _____, on the ____ day of _____ 2020, before me personally appeared _____ to me known and known by me to be the party executing the foregoing Consent Agreement, and she acknowledged said instrument executed by her to be her free act and deed.

Notary Public

My Commission expires: _____

*****For Internal Use Only*****

Date and Time Application Received by RIDEM staff: _____

Name of RIDEM staff receiving application:

Signature of RIDEM staff receiving application:
