PERMIT ALTERATION REQUEST FORM

STATE OF ALASKA DEPARTMENT OF FISH AND GAME PRIVATE NONPROFIT PROGRAM

GENERAL INSTRUCTIONS

- 1. Fill in the blanks on the form provided (grey boxes will expand as you type).
- 2. Where necessary to fully answer a particular question, attach additional pages marked with the corresponding appendix number in the application.
- 3. Applications **must** be typed.
- 4. Applications <u>must</u> be signed by the legally authorized representatives of the corporate applicant.
- 5. The application should be forwarded to the following address:

STATE OF ALASKA
DEPARTMENT OF FISH AND GAME
COMMERCIAL FISHERIES DIVISION
P.O. BOX 1125526
JUNEAU, AK 99811-5526

ATTENTION: PNP HATCHERY PROGRAM MANAGER

6. Requests for assistance in preparation of the application or related activities should be directed to the Program Manager. Such requests will be honored to the extent available staff time and funds permit.

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STATE OF ALASKA DEPARTMENT OF FISH AND GAME PRIVATE NONPROFIT PROGRAM

I. INDENTIFICATION OF APPLICANT

A. Applicant Information

Bill Gass		SSRAA
Applicant Name		Organization
14 Borch st		907-225-9605
Address	Phone Number	
Ketchikan	AK	99901
City	State	Zip
Hatchery Information		
Deer Mountain Hatchery		49
Hatchery Name		PNP Permit Number

II. STATEMENT OF APPLICANT'S GOALS AND OBJECTIVES

A. Describe the nature of the requested alteration, why you have decided to request it, and what you generally expect to accomplish by the expansion of your program, including answers to the following questions. Will the proposed project affect wild salmon stocks or existing fisheries? How will a significant contribution to common property fisheries be made? How will potential effects and interactions between introduced or enhanced stocks and wild stocks be assessed? What marking and recovery studies are being proposed that will allow the project to be evaluated? What are the potential benefits to fisheries or wild stocks from the proposed project? Has this project been discussed with the department's area or regional management biologists? (Attach additional pages as necessary.)

In 2019 SSRAA received a PAR for the Deer Mountain Hatchery to allow for the receipt of 100,000 triploid rainbow trout eggs from the William Jack Hernandez Hatchery. The program planned for a release of 50,000 fry to Ketchikan area lakes and the 100,000 number was recommended in light of the fact that these eggs typically have survivals of 50% or less. In the first year of the program SSRAA was able to release 28,600 fry from the original 100,000 and in 2020 the first transfer of eggs was nearly a complete loss and a second group was received under a 1-time FTP which will allow the program to continue in 2021. This request raises the permitted number to 200,000 as an effort to achieve the desired goal of releasing 50,000. ADF&G Sportfish Division is aware of the change and supports increasing the permitted number. This change is not anticipated to increase the release number beyond the original

intended number. Click here and type text

Ш.	IMPACTS ON EXISTING HATCHERY PROGRAM			

Pink		Coho	
Chui	m	Chinook	600,000
Sock	ceye	Other	100,000
	city After Request pers of green eggs by spe	ecies)	
Pink		Coho	
Chur		Chinook	600,000
Sock	eye	Other	200,00
	cfs from Ketchikan Lak	vater available and the source. tes Hydro-power	Click here and
	cfs from Ketchikan Lak	_	Click here and
8 text	set the amount of water	tes Hydro-power	Click here and

PERMIT ALTERATION REQUEST

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IV. HATCHERY DESIGN

A. Please provide a detailed description of new facilities needed with this alteration (e.g., buildings, incubators, rearing space, piping, etc.). This description should represent a solid concept of the proposed hatchery changes/expansion. Drawings showing the layout of new structures should be attached when appropriate.

No changes to the facility are necessary.	Click here and type
text	

V. <u>DECLARATION AND SIGNATURE</u>

I declare that the information given in this application is, to my knowledge, true, correct, and complete.

Name of Applicant

Signature of Applicant

Signature of Applicant