



**Department of
Fisheries and Aquaculture**

Fish Processing Licensing Board Secretariat

c/o Ian Burford
Director, Licensing and Quality Assurance
Department of Fisheries and Aquaculture
P.O. Box 8700
St. John's, NL A1B 4J6

Instructions for Completion of the Fish Processing Licensing Applications

1. Please read all questions on the application sheet.
2. Please review the Department of Fisheries and Aquaculture's Policy Manual which is online at www.gov.nl.ca/fishaq or you may contact the Department by calling one of the numbers indicated below for any enquires or for a copy of the manual.
3. All sections of the application should be completed; if a question does not apply to your application please indicate with N.A (not applicable).
4. If all relevant questions are not completed, the application will be returned to you, which will delay the process and subsequently any approvals.
5. If all supporting documents are not submitted with your application, the application will be held pending receipt of the documents.
6. It is encouraged that you meet with the Regional Director or Development Officer in your area, prior to completing your application (see contact information below).
7. Please submit your completed application to:

Fish Processing Licensing Board Secretariat
c/o Ian Burford
Director, Licensing and Quality Assurance
Department of Fisheries and Aquaculture
30 Strawberry Marsh Road
P.O. Box 8700
St. John's, NL A1B 4J6
FPLBSecretariat@gov.nl.ca

Contact Information:

Rex Matthews
Director, Avalon and Eastern Region
(709) 832-2860
rmatthews@gov.nl.ca

Wilson Goosney
Director, Western Region
(709) 861-3537
wgoosney@gov.nl.ca

Nelson Higdon
Director, Central Region
(709) 292-4109
nhigdon@gov.nl.ca

Craig Taylor
Director, Labrador Region
(709) 896-3412
craigtaylor@gov.nl.ca

Ian Burford
Director, Licensing and Quality Assurance
(709) 729-3736
iburford@gov.nl.ca



Application for a Fish Processing Licence

Please complete each section; use additional pages, if necessary. It is suggested that a more detailed business plan be attached.

Section A

Please check the appropriate box and submit fee with application.	
<input type="checkbox"/> New primary processing licence (one or more species)	\$7,500.00
<input type="checkbox"/> New species to be added to a primary processing licence	\$2,500.00
<input type="checkbox"/> New emerging species to be added to a primary processing licence	\$1,000.00
<input type="checkbox"/> New secondary processing licence (one or more species)	\$1,000.00
<input type="checkbox"/> New species to be added to a secondary processing licence	\$1,000.00
<input type="checkbox"/> New primary processing licence for aquaculture (one or more species)	\$1,000.00
<input type="checkbox"/> New species added to a primary processing licence for aquaculture	\$1,000.00

Section B

An applicant must, before filing his or her application with the Secretariat, give notice of intent to apply for a licence, by placing an advertisement in the form prescribed in the Fish Processing Licensing Policy Manual Section 6.1 and in the *Fish Processing Board Act*. Please attach copy of advertisement to this application, or forward to the Secretariat, when available. No consideration will be given to the application until after it has been advertised.

Public advertisement in local and major newspaper for two consecutive weeks Yes No?

Name of Major Newspaper: _____ Dates: _____

Name of Local Newspaper: _____ Dates: _____

Section C

Company Name (Applicant): _____

Address: _____

Postal Code: _____

Telephone Number: _____ Fax Number: _____

Email Address: _____

Location of Processing Plant: _____

Company Contact Person: _____ Phone Number: _____

Plant Contact Person: _____ Phone Number: _____

Section D

Species to be processed (e.g., cod)	Where will most of your raw material come from? (e.g., Placentia Bay) (use additional pages if necessary)

Section E

Company Share Structure (provide a separate list, if necessary; sort in descending order).

Names of Major Shareholders	Address	Title	Share Percentage

For non-publicly traded company, if any shareholder has greater than five percent shares in another fish processing company in this province, please submit the following (provide a separate list, if necessary; sort in descending order).

Name of Shareholder with shares in another fish processing company	Name of NL processing company	Percentage shares in that company

Section F

Employment - Current Operation

Total Employment (past three years)

Year	Number of Individuals	Gross Wages Paid (\$)

Labour Force Profile

Percent Male Employees	Percent Female Employees	Age Range (years) (percent)			
		< 30	30 - 40	40 - 50	> 50

Please list the principal communities where employees live (use additional pages, if necessary)

Section G

Employment - Anticipated

<p>Do you anticipate that this proposal will result in:</p> <p><input type="checkbox"/> longer periods of work for your existing work force;</p> <p><input type="checkbox"/> the creation of new jobs; or</p> <p><input type="checkbox"/> both?</p>
<p>If you anticipate longer periods of work for your existing work force, how many additional hours will be created?</p>
<p>If you are creating new employment opportunities, describe the type of work that will be created; for example: 10 cutters; 3 office workers; etc.</p>

Are the necessary labour supply and skills available to operate your facility? Yes No. Please indicate how this has been determined.

Marketing Plan (use additional pages, if necessary)

Product Type: (e.g., cod fillet)	Principal Target Markets		Anticipated Prices (per unit measure) (e.g., \$4.00 U.S./lb)
	Place (e.g., U.S.)	Confirmed (yes or no)*	

* Where possible, attach letters of intent.

List any factors that could negatively affect the forecasted production and marketing plans (use additional pages, if necessary).

Waste Disposal Plan

What are your intentions for disposing of waste from the processing operation? <input type="checkbox"/> Ocean dump <input type="checkbox"/> Landfill <input type="checkbox"/> Process the waste (please specify):

Section I

Is this an existing processing facility? Yes No. If no, please go to Section J. If yes, please submit the following and then continue on to Section J.

History of the Plant

Approximate age of plant: _____

Condition of plant: _____

Has the plant been modernized? Yes No; if yes, when (year)? _____

Please check level of processing (check all that apply): primary secondary value-added

Infrastructure - please tick if the current facility has the following equipment:

- plate freezers blast freezers tunnel freezers brine freezers
 How many? _____ How many? _____ How many? _____ How many? _____
- ice makers off-loading cold storage facilities

List species processed, by year, for the previous two years (use additional pages, if necessary):

Year	Species Processed						

Estimated Capacity¹ (for principal species)

Species	Capacity ¹	Species	Capacity ¹

¹ How much raw material (pounds) can be processed in a day.

Section J

If a new facility is being built or there will be future expansion/development of current plant, please submit the following:

- A description of the processing plant, including capacity, and all infrastructure and cost of infrastructure.
- Pictures and details of all plant features and a diagram of the production area.
- A list of new equipment being purchased or leased.

Section K

Other Information:			
Are there harbour facilities located at the processing plant? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, what is the condition of the harbour facilities? <input type="checkbox"/> poor <input type="checkbox"/> fair <input type="checkbox"/> good <input type="checkbox"/> excellent			
Estimated percent of raw material to be landed at the plant?			
Estimated percent of raw material to be trucked from other areas?			
Please list location of other principle landing sites:			
Is there an approved water source for the plant? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If a water upgrade is necessary, please indicate cost and who is paying:			
Is there appropriate power supply? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If a power upgrade is necessary, please indicate cost and who is paying:			
Where is the nearest school to facility (approximate)? <input type="checkbox"/> 5 miles <input type="checkbox"/> 25 miles <input type="checkbox"/> 50 miles			
Where is the nearest health service?			
What telecommunications are in the area? <input type="checkbox"/> high speed internet <input type="checkbox"/> cell phone service			
What commercial services are in the area (e.g., financial institutions)?			

Section L

The following information must also be provided.

Financing

Information to demonstrate the ability to obtain the appropriate financing including demonstrations of personal reserves, and/or letters of assurance from banks if the project is equity financed. Indicate source of funding, including private investors.

If applicable, the previous year's financial information is to be prepared by an accountant or other person competent to express an opinion on the financial information provided.

Pro-forma Financial Information

Pro-forma financials should include financial data showing the projected cash flows on a monthly basis for the first year and on a yearly basis for the following three years. Pro-forma balance sheets and income statements should be prepared on a yearly basis for four years.

Other

Does the company have any outstanding debts with the Government of Newfoundland and Labrador? **Yes** **No**. If yes, please indicate the amount: \$ _____

Please provide details of outstanding debts.

Is the company in good standing with the Workplace, Health, Safety and Compensation Commission of Newfoundland and Labrador? **Yes** **No**.

Please provide a copy of Articles of Incorporation and a Certificate of Good Standing from the Registrar of Companies.

I certify that the information contained in this application and the related documents is true and correct.

Date

Signature

Print Name

Position in Company

Please affix Corporate Seal



Application for a Transfer of a Fish Processing Licence

Please complete the following information; use additional pages if necessary. It is suggested that a more detailed business plan be attached.

Section A

Please check the appropriate box and submit fee with application.	
<input type="checkbox"/> Transfer of a whole licence (all species) between existing fish processing facilities.	\$7,500.00
<input type="checkbox"/> Transfer of a whole licence (all species) from an existing fish processing facility to a new fish processing facility.	\$7,500.00
<input type="checkbox"/> Transfer of one or more species from an active fish processing facility to another active fish processing facility.	\$2,500.00
<input type="checkbox"/> Transfer of all species of an in-province retail processing licence.	\$1,500.00
<input type="checkbox"/> Transfer of one or more species from one active retail establishment to another active retail establishment.	\$1,000.00

Section B

An applicant must, before filing his or her application with the Secretariat, give notice of intent to apply for a licence, by placing an advertisement in the form prescribed in the Fish Processing Licensing Policy Manual Section 6.1 and in the *Fish Processing Board Act*. Please attach copy of advertisement to this application, or forward to the Secretariat, when available. No consideration will be given to the application until after it has been advertised.

Public advertisement in local and major newspaper for two consecutive weeks Yes No?

Name of Major Newspaper: _____ Dates: _____

Name of Local Newspaper (area from where licence is being transferred): _____ Dates: _____

Name of Local Newspaper (area to where licence is being transferred) : _____ Dates: _____

Section C

Company Name (Applicant): _____

Address: _____

Postal Code: _____

Telephone Number: _____ Fax Number: _____

Email Address: _____

Licence/species transferred from (location): _____

For non-publicly traded company, if any shareholder has greater than five percent shares in another fish processing company in this province, please submit the following (provide a separate list, if necessary; sort in descending order).

Name of Shareholder with shares in another fish processing company	Name of NL processing company	Percentage shares in that company

Section G

Employment - Current Operation (if existing facility)

Total Employment (past three years)

Year	Number of Individuals	Gross Wages Paid (\$)

Labour Force Profile

Percent Male Employees	Percent Female Employees	Age Range (years) (percent)			
		< 30	30 - 40	40 - 50	> 50

Please list the principal communities where employees live (use additional pages, if necessary)		

Section H

Employment - Anticipated

For an existing facility
Do you anticipate that this proposal will result in: <input type="checkbox"/> longer periods of work for your existing work force; <input type="checkbox"/> the creation of new jobs; or <input type="checkbox"/> both?
If you anticipate longer periods of work for your existing work force, how many additional hours will be created?

For a new or existing facility
If you are creating new employment opportunities, describe the type of work that will be created; for example: 10 cutters; 3 office workers; etc.

Is the necessary labour supply and skills available to operate your facility? Yes No. Please indicate how this has been determined.

If the necessary skills are not available, how do you plan to fill the gap? (Describe training plan)
(use additional pages, if necessary).

Please list the principal communities from where you expect new employees to be hired
(use additional pages, if necessary).

Section I

Production Plan (use additional pages, if necessary)

Principal Product Types (e.g., cod fillet)	Anticipated Production (Finished product weight) (pounds) (e.g., 500 pounds)

Principal Product Types (e.g., cod fillet)	Anticipated Production (Finished product weight) (pounds) (e.g., 500 pounds)

Marketing Plan (use additional pages, if necessary)

Product Type: (e.g., cod fillet)	Principal Target Market		Anticipated Prices (per unit measure) (e.g., \$4.00 US/lb)
	Place (e.g., U.S.)	Confirmed (yes or no)*	

* Where possible, attach letters of intent.

List any factors that could negatively affect the forecasted production and marketing plans provided

Waste Disposal Plan

What are your intentions for disposing of waste from the processing operation? <input type="checkbox"/> Ocean dump <input type="checkbox"/> Landfill <input type="checkbox"/> Process the waste (please specify):

Section J

Is this an existing processing Facility? Yes No. If no, please go to Section K. If yes, please submit the following and then continue on to Section K.

History of the Plant

Approximate age of plant: _____

Condition of plant: _____

Has the plant been modernized? Yes No; if yes, when (year)? _____

Please check level of processing (check all that apply): primary secondary value-added

Infrastructure - please tick if the current facility has the following equipment:

plate freezers blast freezers tunnel freezers brine freezers
How many? _____ How many? _____ How many? _____ How many? _____

ice makers off-loading cold storage

List species processed, by year, for the previous two years (use additional pages, if necessary):

Year	Species Processed						

Estimated Capacity¹ (for principal species)

Species	Capacity	Species	Capacity

¹ How much raw material (pounds) can be processed in a day.

Section K

If a new facility is being built or there will be future expansion/development of current Plant; please submit the following:

- A description of the processing plant, including capacity, and all infrastructure and cost of infrastructure.
- Pictures and details of all plant features and a diagram of the production area.
- A list of new equipment being purchased or leased.

Section L

Other Information

Are there harbour facilities located at the processing plant? Yes No

If yes, what is the condition of the harbour facilities? poor fair good excellent

Estimated percent of raw material to be landed at the plant?

Estimated percent of raw material to be trucked from other areas?			
Please list location of other principle landing sites:			
Is there an approved water source for the plant? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If a water upgrade is necessary, please indicate cost and who is paying:			
Is there appropriate power supply? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If a power upgrade is necessary, please indicate cost and who is paying:			
Where is the nearest school to facility (approximate)? <input type="checkbox"/> 5 miles <input type="checkbox"/> 25 miles <input type="checkbox"/> 50 miles			
Where is the nearest health service?			
What telecommunications are in the area? <input type="checkbox"/> high speed internet <input type="checkbox"/> cell phone service			
What commercial services are in the area (e.g., financial institutions)?			

Section M

The following information must also be provided:

Financing:

Information to demonstrate the ability to obtain the appropriate financing including demonstrations of personal reserves, and/or letters of assurance from banks if the project is equity financed. Indicate source of funding, including private investors.

If applicable, the previous year's financial information is to be prepared by an accountant or other person competent to express an opinion on the financial information provided.

Pro-forma Financial Information:

Pro-forma financials should include financial data showing the projected cash flows on a monthly basis for the first year and on a yearly basis for the following three years. Pro-forma balance sheets and income statements should be prepared on a yearly basis for four years.

Section N

Other Information:

For the company transferring the licence:

Does the company have any outstanding debts with the Government of Newfoundland and Labrador? **Yes** **No**. If yes, please indicate the amount: \$ _____

Please provide details of outstanding debts.

Is the company in good standing with Workplace, Health, Safety and Compensation Commission of Newfoundland and Labrador? **Yes** **No**.

Please provide a copy of Articles of Incorporation and a Certificate of Good Standing from the Registrar of Companies.

For the company receiving the licence:

Does the company have any outstanding debts with the Government of Newfoundland and Labrador? **Yes** **No**. If yes, please indicate the amount: \$ _____

Please provide details of outstanding debts.

Is the company in good standing with Workplace, Health, Safety and Compensation Commission of Newfoundland and Labrador? **Yes** **No**.

Please provide a copy of Articles of Incorporation and a Certificate of Good Standing from the Registrar of Companies.

I certify that the information contained in this application and the related documents are true and correct.

Date

Signature

Print Name

Position in Company

Please affix Corporate Seal



Application for a Change of Operator of a Fish Processing Licence

Please complete the following information; use additional pages if necessary. It is suggested that a more detailed business plan be attached.

Section A

Please submit fee with application.

Change of Operator

\$2,500.00

Section B

An applicant must, before filing his or her application with the Secretariat, give notice of intent to apply for a licence, by placing an advertisement in the form prescribed in the Fish Processing Licensing Policy Manual Section 6.1 and in the *Fish Processing Board Act*. Please attach copy of advertisement to this application, or forward to the Secretariat, when available. No consideration will be given to the application until after it has been advertised.

Public advertisement in local and major newspaper for two consecutive weeks Yes No?

Name of Major Newspaper: _____ Dates: _____

Name of Local Newspaper: _____ Dates: _____

Company Name (Applicant): _____

Address: _____

Postal Code: _____

Telephone Number: _____ Fax Number: _____

Email Address: _____

Location of Processing Plant: _____

Company Contact Person: _____ Phone Number: _____

Plant Contact Person: _____ Phone Number: _____

Section E

Employment - Current Operation

Total Employment (past three years)

Year	Number of Individuals	Gross Wages Paid (\$)

Labour Force Profile

Percent Male Employees	Percent Female Employees	Age Range (years) (percent)			
		< 30	30 - 40	40 - 50	> 50

Please list the principal communities where employees live (use additional pages, if necessary).

Section F

Employment - Anticipated

<p>Do you anticipate that this proposal will result in:</p> <input type="checkbox"/> longer periods of work for your existing work force; <input type="checkbox"/> the creation of new jobs; or <input type="checkbox"/> both?
<p>If you anticipate longer periods of work for your existing work force, how many additional hours will be created?</p>
<p>If you are creating new employment opportunities, describe the type of work that will be created; for example: 10 cutters; 3 office workers; etc.</p>

Is the necessary labour supply and skills available to operate your facility? Yes No. Please indicate how this has been determined.

If the necessary skills are not available, how do you plan to fill the gap? (Describe training plan)
 (use additional pages, if necessary).

Please list the principal communities where you expect new employees to be from
 (use additional pages, if necessary).

Section G

Production Plan (use additional pages, if necessary)

Principal Product Types (e.g., cod fillet)	Anticipated Production (Finished product weight) (pounds) (e.g., 500 pounds)

Marketing Plan (use additional pages, if necessary)

Product Type: (e.g., cod fillet)	Principal Target Markets		Anticipated Prices (per unit measure) (e.g., \$4.00 U.S./lb)
	Place (e.g., U.S.)	Confirmed (yes or no)*	

Product Type: (e.g., cod fillet)	Principal Target Markets		Anticipated Prices (per unit measure) (e.g., \$4.00 U.S./lb)
	Place (e.g., U.S.)	Confirmed (yes or no)*	

* Where possible, attach letters of intent.

List any factors that could negatively affect the forecasted information provided (use additional pages, if necessary).

Waste Disposal Plan

What are your intentions for disposing of waste from the processing operation? <input type="checkbox"/> Ocean dump <input type="checkbox"/> Landfill <input type="checkbox"/> Process the waste (please specify):

Section H

History of the Plant

Approximate age of plant: _____

Condition of plant: _____

Has the plant been modernized? Yes No; if yes, when (year)? _____

Please check level of processing (check all that apply): primary secondary value-added

Infrastructure - please tick if the current facility has the following equipment:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> plate freezers
How many? _____ | <input type="checkbox"/> blast freezers
How many? _____ | <input type="checkbox"/> tunnel freezers
How many? _____ | <input type="checkbox"/> brine freezers
How many? _____ |
| <input type="checkbox"/> ice makers | <input type="checkbox"/> off-loading | <input type="checkbox"/> cold storage facilities | |

List species processed, by year, for the previous two years (use additional pages, if necessary).

Year	Species Processed						

Estimated Capacity¹ (for principal species)

Species	Capacity	Species	Capacity

¹. How much raw material (pounds) can be processed in a day.

Section I

If there will be future expansion/development of fish processing plant; please submit the following:

- A description of the processing plant, including capacity, and all infrastructure and cost of infrastructure.
- Pictures and details of all plant features and a diagram of the production area.
- A list of new equipment being purchased or leased..

Section J

The following information must also be provided.

Financing:

Information to demonstrate the ability to obtain the appropriate financing including demonstrations of personal reserves, and/or letters of assurance from banks if the project is equity financed. Indicate source of funding, including private investors.

If applicable, the previous year's financial information is to be prepared by an accountant or other person competent to express an opinion on the financial information provided.

Pro-forma Financial Information:

Pro-forma financials should include financial data showing the projected cash flows on a monthly basis for the first year and on a yearly basis for the following three years. Pro-forma balance sheets and income statements should be prepared on a yearly basis for four years.

Other:

Does the company have any outstanding debts with the Government of Newfoundland and Labrador? Yes No. If yes, please indicate the amount: \$ _____

Please provide details of outstanding debts.

Is the company in good standing with the Workplace, Health, Safety and Compensation Commission of Newfoundland and Labrador? Yes No.

Please provide a copy of Articles of Incorporation and a Certificate of Good Standing from the Registrar of Companies.

I certify that the information contained in this application and the related documents are true and correct.

Date

Signature

Print Name

Position in Company

Please affix Corporate Seal



**Department of
Fisheries and Aquaculture**

Fish Processing Licensing Board Secretariat
c/o Ian Burford
Director, Licensing and Quality Assurance
Department of Fisheries and Aquaculture
P.O. Box 8700
St. John's, NL A1B 4J6

Annual Report for 2004 (Calendar Year)
To be submitted with the Annual Renewal Application

Company Name:

Address:

Postal Code:

Telephone Number:

Fax Number:

Email Address:

Location of Processing Plant:

Contact Person:

Your production and employment data for 2004 will be compiled from your production reports submitted to the Department.

Please submit the following information for 2004.

Market Report

Principal Product Type (e.g., crab sections)	Principal Markets (e.g., U.S.)	Inventory Beginning of Jan	Inventory End of Dec

New Investment

New investment (e.g., equipment, expansion to plant, etc.)	Cost	Source of funds

If you are planning to make significant changes to your processing operation please submit a detailed description.

If you are planning to make significant changes to your processing operation please submit a detailed description.

I certify that the information contained in this application and the related documents are true and correct.

Date

Signature

Print Name

Position in Company

Please affix Corporate Seal