



**STATE OF NORTH CAROLINA – DIVISION OF MARINE FISHERIES  
Federally Funded Disaster Relief Program for Hurricane Florence  
Self-Certification and Assurances (Affidavit)**

\_\_\_\_\_ ] hereby requests federal funds  
Last Name, First Name MI

from the Department of Commerce through the National Oceanic and Atmospheric Administration’s National Marine Fisheries Service.

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

- \_\_\_\_\_ This organization is a Fishery Participant that is an eligible recipient of assistance from the Federally Funded Disaster Relief Program for Hurricane Florence.
- \_\_\_\_\_ Direct payments will not be directed to minors.
- \_\_\_\_\_ Funds will not be used to address any losses already reimbursed by insurance or other Hurricane Florence assistance programs. Infrastructure loss or repairs in excess of insurance reimbursement may be considered.
- \_\_\_\_\_ The Fishery Participant applying for assistance is: (initial only if all statements below are true)
  - not de-barred
  - not on the government’s “do not pay” list
  - in good standing with the Federal and State Government
- \_\_\_\_\_ The Fishery Participant is aware that direct payments are taxable and may be subject to federal auditing processes.
- \_\_\_\_\_ If applying as a seafood dealer, the Fishery Participant agrees to use North Carolina Trip Ticket data if the Participant fails to provide supporting documentation as described in the application.
- \_\_\_\_\_ If applying as a for-hire operation, a bait and tackle business, ocean fishing pier, or seafood processor without a dealer license, the Fishery Participant understands they will be denied if they fail to provide supporting documentation as described in the application.
- \_\_\_\_\_ The Participant agrees to only claim losses and damages resulting exclusively from Hurricane Florence.
- \_\_\_\_\_ The Fishery Participant verifies that all information submitted in the application, affidavit, and supporting documentation is true, accurate, and complete.

By signing this affidavit and applying for assistance as allowable under H.R.2157, 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 three years after the close of the primary grant award to North Carolina Division of Marine Fisheries (NCDMF). Records must be made available upon request from the primary grantee, state/territory, NOAA, or the Office of the Inspector General.

This form must accompany the application for the Fishery Participant to be considered. Applications, affidavits, and other required documentation must be delivered in person to the NCDMF Headquarters Office located in Morehead City or postmarked by April 18, 2022. Applications and supporting documentation submitted after the deadline or to other NCDMF offices will not be considered. Incomplete applications will not be considered. Claims of revenue loss outside of the eligibility period identified on the application documentation will not be considered.

**All information provided on this document is true, accurate, and complete.**

\_\_\_\_\_  
Authorized Representative/Fisheries Participant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
MI

\_\_\_\_\_  
Authorized Representative (Please Print)