

# Alaska Salmon Product Development Credit Pre-qualification Form

575

<input type="checkbox"/> SSN <input type="checkbox"/> EIN			Fisheries Business License Number	
Individual or Corporate Name			Tax Year of Proposed Investment	
Facility Location or Vessel Name			Contact Person	
Mailing Address			Phone Number	Fax Number
City	State	Zip Code	Email Address	
Total Estimated Cost of Proposed Investment - \$				

**You must submit the following information along with this form before your request for pre-qualification can be processed:**

1. A detailed listing of the equipment to be purchased along with a description of what the equipment does. For each piece of equipment, include the name of the manufacturer and the model number.
2. The estimated cost of each piece of equipment, including installation, supported by a price list or quote from the manufacturer or seller.
3. A detailed description of the value-added salmon product(s), non-value-added salmon product(s) and non-salmon product(s) the equipment will be producing.
4. An estimate (in pounds) of value-added salmon product(s), non-value-added salmon product(s) and non-salmon product(s) to be produced in the first tax year by each piece of equipment upon which you wish to claim a salmon credit.

Will you be applying for or receiving a grant to finance a portion of the total cost of the proposed investment?

YES       NO

***I agree under penalty of unsworn falsification that this pre-qualification filing (including all accompanying attachments) has been examined by me and, to the best of my knowledge, is true, correct and complete. I affirm that the equipment items referenced will be purchased new with no previous use, will first be placed in service in Alaska and shall remain in Alaska, and will be used predominantly to produce a value added salmon product beyond headed and gutted. I understand that the Department of Revenue reserves the right to audit all accounts related to this salmon product development credit pre-qualification filing.***

Officer's Signature	Printed Name
Title	Date

For Department Use Only			
<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	By	Title	Date

575