



U.S. DEPARTMENT OF COMMERCE  
NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION  
NATIONAL MARINE FISHERIES SERVICE

OMB No.  
0648-0304  
Expires: 10/31/2018

## HIGH SEAS FISHING PERMIT APPLICATION

Submit this application to the NMFS Regional Administrator with whom you normally interact on fisheries matters or to the Director of the Office of International Affairs. Addresses are contained herein. Include payment of \$129, copy of the vessel's U.S. Coast Guard documentation or state registration, and a color photograph of the fishing vessel.

### SECTION 1. VESSEL INFORMATION

USCG Doc. or State Registration No.	Vessel Name	Radio Call Sign
Crew Size (including officers)	Shaft Horsepower	Refrigeration Type (Check only one) <input type="checkbox"/> ICE <input type="checkbox"/> BRINE <input type="checkbox"/> BLAST <input type="checkbox"/> PLATE <input type="checkbox"/> TUNNEL <input type="checkbox"/> RSW    OTHER (please specify): _____

### SECTION 2. VESSEL OWNERSHIP INFORMATION

Managing Owner as shown on U.S. Coast Guard Form 1270 or State Registration (person or company). If more than one, please attach required information for each owner on a separate paper.

Owner's Name, Last	First	Middle	Suffix	Taxpayer Identification No.
Company Name, if vessel is owned by a business entity		Company State and Date of Formation (mm/dd/yyyy)		Date of Birth (mm/dd/yyyy)
Business Address		Phone No.	Fax No.	
City and State		Zip code	Email Address (optional)	

### SECTION 3a. VESSEL MANAGER INFORMATION

If a business is in charge of managing the operations of the vessel, enter the information for the business below.

Company Name,	Company State and Date of Formation (mm/dd/yyyy)	Taxpayer Identification No.
Business Address	Phone No.	Fax No.
City and State	Zip code	Email Address (optional)

### SECTION 3b. VESSEL OPERATOR INFORMATION

Enter information for the master on board the vessel. Use additional sheets if there are more than one vessel operators.

Operator's Name, Last	First	Middle	Suffix	Taxpayer Identification No.
Business Address			Date of Birth (mm/dd/yyyy)	
City and State			Zip code	
Phone No.	Fax No.	Email Address (optional)		

### FOR OFFICIAL USE ONLY

Date Received:

Check/Money Order Number:

Reviewer:

**SECTION 4. VESSEL STATUS. If yes, please refer to additional instructions below.**

Has the vessel identified above flown the flag of another nation within the last three years?  YES  NO

*If yes, provide the following information for each period during which the vessel operated under other than the U.S flag: period beginning and end dates (mm-dd-yyyy); vessel name, flag, international radio call sign, and homeport; owner name, date of birth, address, phone, and fax; and operator name, date of birth, address, phone, and fax. Provide the information on a separate sheet of paper.*

Has the vessel identified above, under its current name/flag or any previous names/flags, had any permit or license suspended or revoked within the past three years?  YES  NO

*If yes, list and attach on a separate sheet of paper the circumstances surrounding each such instance and provide an explanation of the current status of the suspension or revocation including whether there has been a change in ownership of the vessel.*

**SECTION 5. VESSEL TYPE**

**Check ONE box that best describes your vessel's type when fishing on the high seas.**

<p><b>TRAWLERS</b></p> <p><input type="checkbox"/> 0110 – Stern trawler</p> <p><input type="checkbox"/> 0122 – Stern trawlers wet-fish</p> <p><input type="checkbox"/> 0121 – Stern trawlers freezer</p> <p><input type="checkbox"/> 0120 – Stern trawlers factory</p> <p><input type="checkbox"/> 0199 – Trawler, other</p> <p><b>PURSE SEINERS</b></p> <p><input type="checkbox"/> 0228 – Tuna purse seiner</p> <p><input type="checkbox"/> 0229 – Purse Seiner, other</p>	<p><b>GILL NETTERS</b></p> <p><input type="checkbox"/> 0410 – Drift netter</p> <p><input type="checkbox"/> 0490 – Gill netter, other</p> <p><b>LOONGLINERS</b></p> <p><input type="checkbox"/> 623 – Freezer Longliner</p> <p><input type="checkbox"/> 0624 – Factory Longliner</p> <p><input type="checkbox"/> 0626 – Tuna Longliner</p> <p><input type="checkbox"/> 0627 – Longliner, Other</p>	<p><b>OTHER LINERS</b></p> <p><input type="checkbox"/> 0705 – Squid Jigging Line Vessel</p> <p><input type="checkbox"/> 0710 – Handliner</p> <p><input type="checkbox"/> 0720 – Pole and Line Vessel</p> <p><input type="checkbox"/> 0730 – Troller</p> <p><b>OTHER VESSELS</b></p> <p><input type="checkbox"/> Bunker</p> <p><input type="checkbox"/> Fish Carrier</p> <p><input type="checkbox"/> Support Vessel, Other*</p> <p>Write support vessel type here: _____</p>
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**SECTION 6. AUTHORIZED HIGH SEAS FISHING ACTIVITIES.**

**Select the fishery(ies) for which you will actually fish. You are responsible for obtaining any permits associated with the authorized fisheries and meeting the reporting requirements. This form must be sent to the office corresponding with the fishery(ies) you select.**

Fishery	Submit form to	NMFS Address
<input type="checkbox"/> Pacific Highly Migratory Species Fisheries – 50 CFR 660, Subpart K <input type="checkbox"/> Eastern Pacific Tuna Fisheries – 50 CFR 300, Subpart C <input type="checkbox"/> South Pacific Albacore Troll Fishing	National Marine Fisheries Service West Coast Regional Office ATTN: Permits National Marine Fisheries Service	501 West Ocean Blvd. Suite 4200 Long Beach, CA 90802-4213 Email: wcr.permits@noaa.gov Phone: (562) 980-4001; Fax: (562) 980-4047
<input type="checkbox"/> Western Pacific Pelagic Fisheries – 50 CFR 665, Subpart F <input type="checkbox"/> South Pacific Tuna Fisheries – 50 CFR 300, Subpart D	National Marine Fisheries Service Pacific Islands Regional Office ATTN: Permits	1845 Wasp Blvd., Bldg 176 Honolulu, HI 96818 Email: piro-permits@noaa.gov Phone: (808) 725-5000; Fax: (808) 725-5215
<input type="checkbox"/> Atlantic Highly Migratory Species – 50 CFR 635	National Marine Fisheries Service Southeast Region Constituency Services Branch <i>Can also be sent to the Northeast Region (see below address)</i>	263 13th Avenue South St. Petersburg, FL 33701 Phone: (727) 824-5326; Fax: (727) 551-5747
<input type="checkbox"/> Antarctic Marine Living Resources – 50 CFR 300, Subpart G	National Marine Fisheries Service Office of International Affairs and Seafood Inspection	1315 East-West Hwy (F/IS) Silver Spring, MD 20910 Phone: (301) 427-8350; Fax: (301) 713-2313
<input type="checkbox"/> Northwest Atlantic Fishery	National Marine Fisheries Service Greater Atlantic Region	55 Great Republic Drive Gloucester, MA 01930-2276 Phone: (978) 281-9300; Fax: (978) 281-9333

**SECTION 7. COLOR PHOTOGRAPH OF VESSEL**

Provide a photograph of the vessel in its current form and appearance, following the attached instructions. Indicate whether an electronic or paper photograph is being provided. Enter the date the photograph was taken. Photographs of the vessel can be emailed to the email address in Section 6 above.

If the vessel's form or appearance materially changes (including, but not limited to, the vessel is painted another color, the vessel is renamed, or the vessel undergoes a structural modification), you must submit to NMFS a new photograph of the vessel within 15 days of the change).

Date photograph taken: \_\_\_\_\_(mm/dd/yyyy)

Electronic photograph emailed separately       Paper photograph enclosed with this application

**SECTION 8. SIGNATURE**

A non-refundable application fee of \$129.00 in the form of a check or money order made payable to "U.S. Department of Commerce – NOAA" must accompany each application. Mail the application, payment, copy of the vessel's U.S. Coast Guard documentation or state registration, and a color vessel photograph to the Regional Administrator identified in Section 6 above.

By signing this application, the undersigned owner or operator of the vessel identified above states, under penalty of perjury, that all information set forth within this application is true and correct.

Signature	Name (print legibly or type)	Date

Submission of application information is mandatory in order to be considered for a permit and is used to determine if a permit should be issued. The public reporting burden for this collection of information is estimated to average 30 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining data needed, and completing and reviewing the information. Send comments regarding this burden estimate or suggestions for reducing this burden to: NMFS, Office of International Affairs and Seafood Inspection, 1315 East West Highway, Silver Spring, MD 20910. Notwithstanding any other provision of law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.

Disclosure of your Taxpayer Identification Number [Social Security Number (SSN) or Employer Identification Number] is mandatory. Statutory provisions enacted by the Debt Collection Improvement Act of 1996 (Public Law 104-134) require that persons doing business with the Federal Government, including those applying for licenses or permits, must present their Taxpayer Identification Number. SSNs will remain confidential and will be protected from disclosure in accordance with applicable law.

**INSTRUCTIONS FOR THE  
PERMIT APPLICATION FOR COMMERCIAL FISHING ON THE HIGH SEAS**

**GENERAL INFORMATION**

A permit is required for commercial fishing vessels that operate on the high seas. Consult the U.S. Code of Federal Regulations (Title 50 CFR Part 300 Subparts A and Q) for application requirements, permit eligibilities, and related information.

Complete all sections of the application form. This information is being collected by the National Marine Fisheries Service (NMFS) to ensure timely and accurate records are available concerning the fishing vessels of the U.S. that participate in fishing on the high seas, consistent with the High Seas Fishing Compliance Act.

Applications should be typed or hand written in ink. Incomplete or illegible applications will not be accepted. The non-refundable application fee is \$129. A check or money order payable to the "U.S. Department of Commerce – NOAA" must accompany each application.

Mail the application, payment, and all required supporting information to one of the offices noted in Section 6 below. Submit your application to the Regional Administrator with whom you normally interact on fisheries matters.

Owners or operators of U.S. vessels used for commercial fishing for highly migratory species (HMS) on the high seas in the convention area of the Western and Central Pacific Fisheries Commission (WCPFC) are required to obtain a NMFS-issued fishing authorization called a "WCPFC Area Endorsement" in addition to the permit for fishing on the high seas. The application for the WCPFC Area Endorsement can be obtained from NMFS Pacific Islands Regional Office (address is below under Section 6). The WCPFC Area Endorsement is issued by the Regional Administrator of NMFS Pacific Islands Region as an endorsement on the permit issued under the High Seas Fishing Compliance Act. Any vessels receiving fish from another fishing vessel or bunkering or otherwise supplying or supporting a vessel that is harvesting HMS, as well as those vessels harvesting HMS, are subject to this requirement.

**COLOR PHOTOGRAPH OF THE VESSEL**

Include with this application a full-color photograph of the vessel in its current form and appearance, in either electronic or paper format. If the appearance of the vessel materially changes after this form and the photograph have been submitted (including, but not limited to, the vessel is painted another color, the vessel is renamed, or the vessel undergoes a structural modification), you must inform NMFS and submit a new photograph of the vessel within 15 days of the change.

The photograph must meet the following specifications: The photograph must show a bow-to-stern side-view of the vessel, clearly and legibly displaying the vessel name and markings, and such markings must be in accordance with the vessel identification requirements of 50 CFR Part 300 Subpart Q. Paper photographs must be at least 5 by 7 inches and no greater than 8½ by 11 inches in size. Electronic photographs must:

- (1) be in either jpg or tiff file formats;
- (2) have a resolution of at least 300 pixels per inch at a size of 5 by 7 inches; and
- (3) be of a file size no greater than 2 megabytes (MB).

Paper photographs may be submitted together with this form. Write clearly on the back of the photograph or a separate piece of paper the following information: "High Seas Fishing Permit," name of applicant, name of vessel, vessel's documentation or registration number, and date photograph was taken (mm/dd/yyyy).

Electronic photographs may be sent via email to the addresses noted in Section 6 of the application. Identify the message subject as: "Vessel Photograph for High Seas Fishing Permit" and include in the message body the following information: name of the applicant, name of vessel, vessel's documentation or registration number, and date photograph was taken (mm/dd/yyyy).

## APPLICATION INSTRUCTIONS

### SECTION 1. VESSEL INFORMATION

Enter the U.S. Coast Guard Official (USCG) Documentation Number assigned to the vessel. Attach a copy of the vessel's current documentation (Form CG-1270). If the vessel is not USCG documented, enter the vessel's current state registration number and attach a copy of the vessel's current state registration. Insure that all photocopies are completely legible.

Enter the current name of the vessel.

Enter the radio call sign currently assigned to the vessel.

Enter the total number of crew members and officers the vessel normally carries.

Enter shaft horsepower.

Indicate refrigeration type. If selecting "OTHER," write in the refrigeration type.

### SECTION 2. VESSEL OWNERSHIP INFORMATION

If the vessel is owned by a corporation or limited liability company, enter the company name and the jurisdiction (state) where the company was formed and the date of formation (such as the date the articles of incorporation or registration documents were filed), taxpayer identification number, business address, and phone and fax numbers.

If the vessel is owned by individual(s) or a partnership, provide each owner's full legal name, date of birth, business address, telephone number, and fax number. Inclusion of an email address is optional.

If there is more than one owner, attach the required information for each additional owner on a separate paper.

### SECTION 3. VESSEL MANAGER AND OPERATOR INFORMATION

Enter the name, date of birth, business address, telephone number, and fax number for the individual or partnership that has control over the operation of the vessel. If the vessel operator is a corporation or a limited liability company, enter the company name and the jurisdiction (state) where the company was formed and the date of formation (such as the date the articles of incorporation or registration documents were filed), and the taxpayer identification number. Inclusion of an email address is optional.

### SECTION 4. VESSEL STATUS

Indicate whether the vessel has flown the flag of another nation within the last three years. Also indicate if the vessel, under its current or any previous names/flags, had any permit or license suspended or revoked within the past three years. Provide the additional information concerning the circumstances regarding the suspension or revocation. Indicate whether the suspension or revocation was related to a failure to comply with conservation and management measures.

### SECTION 5. FISHING VESSEL TYPE

Check the box for the principal vessel type of your vessel. Only one type may be selected.

### SECTION 6. AUTHORIZED HIGH SEAS FISHING ACTIVITIES

Fishing on the high seas must generally be associated with at least one fishery that is authorized by a Fishery Management Plan or an international regional fisheries organization. Indicate those fisheries for which you already hold a permit or have applied for a permit and under which you will actually fish. **You are responsible for meeting the reporting requirements for all you select.** Below are the laws and regulations that apply to the fisheries. The NMFS office to which you submit the application for a high seas permit is also listed below.

**Pacific HMS Fisheries (50 CFR 660, Subpart K):** Albacore troll fishing conducted in the North Pacific Ocean, tuna purse seine fishing, and tuna longline fishing (i.e., deep set fishing) by vessels with permits issued pursuant to 50 CFR 660, Subpart K – Pacific HMS Fisheries; Fishery Management Plan for West Coast HMS.

**Eastern Pacific Tuna Fisheries (50 CFR 300, Subpart C):** Tuna purse seine fishing in the eastern tropical Pacific Ocean regulated pursuant to 50 CFR 300, Subpart C – Eastern Pacific Tuna Fisheries and 50 CFR 216.24 – Taking and related acts incidental to commercial fishing operations by tuna purse seine vessels in the eastern tropical Pacific Ocean; Convention for the Establishment of an Inter-American Tropical Tuna Commission (IATTC), 1949; Tuna Conventions Act of 1950 (16 U.S.C. 951-961) as amended by the International Dolphin Conservation Act (IDCA) of March 3, 1999 (16 U.S.C. 1413).

**South Pacific Albacore Troll Fishery:** Albacore troll fishing conducted in the South Pacific Ocean.

***The following office accepts High Seas Fishing Permit Applications for Pacific HMS Fisheries, Eastern Pacific Tuna Fisheries, and South Pacific Albacore Troll Fishery and can provide additional information on these fisheries, including information about reporting requirements:***

Regional Administrator, West Coast Region  
National Marine Fisheries Service  
ATTN: Permits  
501 West Ocean Blvd., Suite 4200  
Long Beach, CA 90802-4213  
Phone: (562) 980-4030; Fax: (562) 980-4047

**Western Pacific Pelagic Fisheries (50 CFR 665, Subpart F):** Fishing using troll, handline, or longline for Pacific pelagic management unit species regulated pursuant to 50 CFR 665, Subpart F – Western Pacific Pelagic Fisheries; FMP for Pelagic Fisheries of the Western Pacific Region.

**South Pacific Tuna Fisheries (50 CFR 300, Subpart D):** Tuna purse seine fishing in the South Pacific Ocean regulated pursuant to 50 CFR 300, Subpart D – South Pacific Tuna Fisheries; Treaty on Fisheries Between the Governments of Certain Pacific Island States and the Government of the United States of America (SPTT), 1987; South Pacific Tuna Act of 1988 (16 U.S.C. 973 *et seq.*).

***The following office accepts High Seas Fishing Permit Applications for Western Pacific Pelagic Fisheries and South Pacific Tuna Fisheries and can provide additional information on these fisheries, including information about reporting requirements:***

National Marine Fisheries Service  
Pacific Islands Regional Office  
ATTN: Permits  
1845 Wasp Blvd., Bldg. 176  
Honolulu, HI 96818  
Phone: (808) 725-5000; Fax: (808) 725-5215

**Atlantic Highly Migratory Species (50 CFR 635):** Fishing in the Atlantic Ocean for Atlantic tunas, swordfish and sharks by vessels (on the high seas, the vessels are primarily longline) with permits issued pursuant to Title 50 of the Code of Federal Regulations (CFR) Part 635 – Atlantic Highly Migratory Species (HMS); Fishery Management Plan (FMP) for Atlantic Tunas, Swordfish and Sharks; International Convention for the Conservation of Atlantic Tunas (ICCAT), 1969; Atlantic Tunas Convention Act of 1975 (16 U.S.C. 971 *et seq.*).

***Applications for High Seas Fishing Permits to fish for Atlantic tunas, swordfish, and sharks should be sent to one of the following two offices:***

Regional Administrator, Greater Atlantic Region  
National Marine Fisheries Service  
55 Great Republic Drive  
Gloucester, MA 01930-2276  
Phone: (978) 281-9300; Fax: (978) 281-9333

Regional Administrator, Southeast Region  
National Marine Fisheries Service  
Constituency Services Branch  
263 13th Avenue South  
St. Petersburg, FL 33701  
Phone: (727) 824-5326; Fax: (727) 551-5747

***For additional information on Atlantic HMS, including information about reporting requirements, contact:***

National Marine Fisheries Service  
Office of Sustainable Fisheries  
Highly Migratory Species Management Division (F/SF1)  
Silver Spring, MD 20910  
Phone: (301) 427-8503; Fax: (301) 713-1917

**Northwest Atlantic Fishery:** Fishing in the Northwest Atlantic Ocean for species managed pursuant to the Convention on Future Multilateral Cooperation in the Northwest Atlantic Fisheries (NAFO) (16 U.S.C. 5601).

***The following office accepts High Seas Fishing Permit Applications for the Northwest Atlantic Fishery and can provide additional information on this fishery, including information about reporting requirements:***

Regional Administrator, Greater Atlantic Region  
National Marine Fisheries Service  
55 Great Republic Drive  
Gloucester, MA 01930-2276  
Phone: (978) 281-9300; Fax: (978) 281-9333

**Antarctic Marine Living Resources (50 CFR 300, Subpart G):** Fishing for species specified in a valid Antarctic Marine Living Resources (AMLR) harvesting permit, issued in accordance with 50 CFR 300.112, within the area of the Convention for the Conservation of Antarctic Living Marine Resources outside of Exclusive Economic Zones in the Southern Ocean. Fishing must be conducted only for the species specified in a valid AMLR harvesting permit, which will also specify the area(s) of Convention waters authorized for fishing, validity period of the AMLR harvesting permit and any other requirements and conditions of fishing deemed necessary; Convention for the Conservation of Antarctic Living Marine Resources, 1982; Antarctic Marine Living Resources Act of 1984, (16 U.S.C. 2431 *et seq.*).

***The following office accepts High Seas Fishing Permit Applications for Antarctic Marine Living Resource fisheries and can provide additional information on these fisheries, including information about reporting requirements:***

National Marine Fisheries Service  
Office of International Affairs and Seafood Inspection  
1315 East West Highway (F/IS)  
Silver Spring, MD 20910  
Phone: (301) 427-8350; Fax: (301) 713-2313

## **SECTION 7. COLOR PHOTOGRAPH OF VESSEL**

Provide a photograph of the vessel in its current form and appearance, following the instructions on page 1. Indicate whether an electronic or paper photograph is provided and enter the date the photograph was taken.

## **SECTION 8. SIGNATURE**

The application must be signed by the owner or operator of the vessel. Sign and print your name and enter the date the application was signed. Be sure to include the non-refundable application fee of \$129.00 in the form of a check or money order made payable to the "U.S. Department of Commerce – NOAA" along with the copy of the vessel's USCG documentation or state registration.





**Section 4: TRANSSHIPED FISH**

**WEIGHT.** WW: whole weight, GG: gilled & gutted, GX: gutted, headed & tailed, GT: gilled, gutted & tailed, GO: gutted only, not gilled, FL: filleted, LO: loins

**GEAR.** PS: purse seines, DL drifting longlines, PL: poles and lines, HOVL: hand operated vertical lines (non-squid), DN: driftnets, TL: trolling lines, HP: harpoons, MVL: mechanized vertical lines (non-squid), OT: other type of gear

SPECIES	FR-Fresh FZ-Frozen DR-Dried	FORM OF PRODUCT (enter weight codes shown above)	QUANTITY TRANSSHIPPED		FISHING GEAR USED TO TAKE THE FISH (enter gear code as shown above)	GEOGRAPHIC LOCATION OF FISH CATCHES		
			NUMBER OF FISH	ESTIMATED WEIGHT AND UNIT OF MEASUREMENT		Ocean Area	Circle One: EEZ (Country of Capture) or HS (High Seas)	If EEZ, enter the country of capture
							EEZ or HS	
							EEZ or HS	
							EEZ or HS	
							EEZ or HS	
							EEZ or HS	
							EEZ or HS	
							EEZ or HS	

**Section 5: CREW OR SUPPLIES FROM RECEIVING VESSEL**

Were any of the following provided by the receiving vessel to the offloading vessel?

Crew (enter number of persons): \_\_\_\_\_ Fuel (enter amount): \_\_\_\_\_ Supplies (enter type): \_\_\_\_\_

**Section 6: SIGNATURE**

I certify that the above information is complete and accurate to the best of my knowledge.

OWNER or OPERATOR NAME (Print): \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

Indicate if owner or operator of:  Offloading Vessel  Receiving Vessel

Public reporting burden for this collection of information is estimated to average 60 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other suggestions for reducing this burden to Trade and Marine Stewardship Division, NMFS Office of International Affairs and Seafood Inspection, 1315 East-West Hwy (F/IS), Silver Spring, MD 20910. Information submitted to NMFS will be managed as confidential data consistent with the requirements of NOAA Administrative Order 216-100 and regulations under 50 CFR Part 300. Notwithstanding any other provisions of the law, no person is required to respond to, nor shall any person be subjected to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.

## HIGH SEAS TRANSSHIPMENT DECLARATION FORM INSTRUCTIONS

**Complete this form for any transshipments taking place on the high seas where the use of the Pacific Transshipment Declaration Form is not required. Mail or fax the completed form to the Regional Administrator who issued the vessel's high seas fishing permit. The address and fax number can be found on your high seas fishing permit. Forms must be submitted within 15 days of the vessel entering port.**

**LOCATION OF TRANSSHIPMENT:** Enter the latitude and longitude in decimal form, to the nearest 0.1 degrees, at the start of the transshipment.

**DATE(S) OF TRANSSHIPMENT:** Enter the beginning and ending dates for the transshipment as MM/DD/YYYY to MM/DD/YYYY.

### **Section 1: OFFLOADING VESSEL**

Enter the name of the offloading vessel. Enter the offloading vessel's official number, which is the documentation number assigned by the U.S. Coast Guard (USCG) or the certificate number issued by a state for an undocumented vessel, or any equivalent number if the vessel is registered in a foreign nation.

Enter the full name of the offloading vessel operator. "Operator" means the master or other individual aboard and in charge of the vessel.

### **Section 2: RECEIVING VESSEL**

Enter the name of the receiving vessel. Enter the receiving vessel's official number, which is the documentation number assigned by the USCG or the certificate number issued by a state for an undocumented vessel, or any equivalent number if the vessel is registered in a foreign nation. Enter the full name of the receiving vessel operator. "Operator" means the master or other individual aboard and in charge of the vessel.

Enter the estimated quantity of fish product on board the receiving vessel prior to this transshipment, broken down by the area of capture of the product. Enter the unit of measurement for the amount (pounds (lb) or metric tons (mt)).

### **Section 3: TRANSSHIPPED FISH**

If a given species was in more than one condition (e.g., both fresh and frozen) or in more than one product form (e.g., some whole and some gutted and gilled), a separate entry must be made in each instance. If a given species was caught by different gear types, a separate entry must be made for each gear type.

For each entry, identify the processed state of the fish (FR for fresh, FZ for frozen, or DR for dried), the processed state of the product using the weight codes identified on the form, and the estimated weight of the product

transshipped and the unit of measurement (pounds (lb), metric tons (mt), or kilograms (kg)). Operators completing Section 7 of the form must use kg as the unit of measurement. For longline-caught fish, also enter the number of fish transshipped.

For each species transshipped, enter the fishing gear used to take the fish using the gear codes identified on the form. If the fishing gear is not included in the list, enter the code for "Other type(s) of gear" (OT) and specify the fishing gear.

For each entry, enter ocean area (North or South Atlantic, North or South Pacific, etc.) in which the product was caught. Circle EEZ if the product was caught in waters under national jurisdiction (of any nation). Circle HS if the product was caught on the high seas (in international waters). If EEZ is circled, specify the name of the country in whose waters the fish were captured.

Additional forms should be used to accommodate additional species and multiple entries of the same species.

### **Section 4: CREW OR SUPPLIES FROM RECEIVING VESSEL**

Enter information on any crew, fuel, or supplies provided to the offloading vessel.

### **Section 5: SIGNATURE**

The owner or operator of the vessel must print his or her name, sign it, and give the date of signature.

Check one box to indicate whether you are the owner or operator of the OFFLOADING vessel or the owner or operator of the RECEIVING vessel.