

National Marine Fisheries Service
National Oceanic and Atmospheric Administration
U.S. Department of Commerce

WESTERN PACIFIC CRUSTACEAN FISHERIES

DAILY LOBSTER CATCH REPORT

NAME OF VESSEL _____

PERMIT NUMBER _____

PAPERWORK REDUCTION ACT INFORMATION

PUBLIC REPORTING BURDEN FOR THIS COLLECTION IS ESTIMATED AT 5 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 ASPECT OF THIS COLLECTION OF INFORMATION, INCLUDING SUGGESTIONS FOR REDUCING THIS BURDEN, TO REGIONAL ADMINISTRATOR, SOUTHWEST REGION, NMFS, 501 W. OCEAN BOULEVARD, SUITE 4200, LONG BEACH, CALIFORNIA 90802.

This information is being collected to ensure accurate and timely records about the fishing activity of persons licensed to participate in fisheries under Federal regulations in the Western Pacific Region. This will enable the National Marine Fisheries Service and the Western Pacific Fishery Management Council to (a) determine how those persons would be affected by changes in management; (b) ensure that they are informed about prospective changes in fishery regulations and the analysis of estimated impacts; and (c) determine whether the objectives of the fishery program are being achieved by monitoring the fishery and evaluating the impacts on stocks and the fishery participants and related businesses. Responses to the collection are required to obtain the benefit of a license for the fishery involved (ref. 50 CFR 660.13). Data provided concerning the activities and business of the respondents are handled as confidential under the Magnuson-Stevens Fishery Conservation and Management Act (Sec. 402(b)). Notwithstanding any other provision of the 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.

OMB NUMBER: 0648-0214

Expiration Date:

DAILY LOBSTER CATCH REPORT

- > NAME OF VESSEL _____ LOBSTER PERMIT NUMBER _____
 > SIZE OF CREW _____
 > BANK FISHED (only one bank per page, please) _____
 Statistical Area: _____ SubAreas: A B C D E F G H I
 Statistical Area: _____ SubAreas: A B C D E F G H I
 Statistical Area: _____ SubAreas: A B C D E F G H I
 Statistical Area: _____ SubAreas: A B C D E F G H I
- > Wave Height: _____ Sea Surface Temperature: _____ °F (if taken) Wind Speed: _____ (knots)
- > DATE GEAR SET ___/___/___ TIME BEGIN SET _____ # TRAPS SET _____
- > DATE GEAR HAULED ___/___/___ TIME END OF HAUL _____ # TRAPS HAULED _____
 # TRAPS LOST _____

SPECIES	NUMBER KEPT		NUMBER DISCARDED	
	NON-BERRIED	BERRIED	NON-BERRIED	BERRIED
RED SPINY LOBSTER 6486060101				
SLIPPER LOBSTER 6486070201				
Ridge Back Slipper 6486070202				
Green Spiny Lobster 6486060102				
Kona Crab 6488010101				
Octopus 7074080000				
Others: (specify)				

PROTECTED SPECIES OBSERVATIONS

(Enter seal & turtle numbers; identify other in appropriate box)	Monk Seal	Turtle	Other
Observed in area			
Observed in vicinity of gear			
Interfering with fishing operations			
Preying on released lobsters			
Entangled and released alive			
Entangled and released dead			

Logged by Vessel Captain

> PRINT NAME: _____ SIGNATURE _____

> DATE ___/___/___