DOCUMENT NUMBER		ICCAT SWORDFISH STATISTICAL DOCUMENT					
	T SECTION:						
1. FLAC	G COUNTRY/ENTII	Y/FISHIN	NG ENTITY				
2. DESC	CRIPTION OF VESS	EL (if app	licable)				
Vessel Name			Registration Nu	Registration Number LOA (m) ICCAT Record No. (i		ord No. (if applicable)	
3. POINT OF EXPORT:							
CITY, STATE OR PROVINCE COUNTRY/ENTITY/FISHING ENTITY							
	A OF CATCH (Check		_				
· ·	a) North Atlantic	` '	,	c) Mediterranean	(d) Pacific	(e) Indian	
	Se of (d) or (e) is check CRIPTION OF FISH		ns 5 and 6 below do 1	not need to be filled out.			
	71		me of Harvest  Gear Code <sup>b</sup>		Net Weight		
F/FR	RD/GG/DR/FL/OT	<u> </u>	(mm/yy)	1	T	(kg)	
<sup>a</sup> F=Fres	h, FR=Frozen, RD=Ro	ound, GG=0	Gilled & Gutted, DR	=Dressed, FL=Fillet, ST=	Steak,		
OT=Others (Describe the type of product:)							
	he Gear Code is OT, de		• •	: 4	L- ICCAT -1	)	
						native minimum size for f pieces, the pieces were	
	swordfish the exporter must certify that the listed Atlantic swordfish are greater than 15 kg(33lb.) or if pieces, the pieces were derived from a swordfish weighing >15kg.						
Lagutify	that the above informat	i i		to the best of my lymeryla	dee and haliaf		
I certify t		_	olete, true and correct	to the best of my knowle	_	License #(if	
I certify t	that the above informat <b>Name</b>	_		to the best of my knowle  Signature	edge and belief.  Date	<b>License</b> # (if	
I certify t		_	olete, true and correct	=	_	<b>License</b> #(if applicable)	
I certify t		_	olete, true and correct	=	_		
7. GOVI	Name  ERNMENT VALIDA	TION:	olete, true and correct	Signature	Date	applicable)	
7. GOVI	Name  ERNMENT VALIDA	TION:	olete, true and correct	Signature ect to the best of my know	Date  Wledge and belief.	applicable)	
7. GOVI	Name  ERNMENT VALIDA  e that the above inform	TION:	olete, true and correct Address  mplete, true and corre	Signature ect to the best of my know Total	Date	applicable) ment: kg	
7. GOVI	Name  ERNMENT VALIDA	TION:	olete, true and correct Address  mplete, true and corre	Signature ect to the best of my know	Date  wledge and belief. weight of the ship	applicable)	
7. GOVI I validat	Name  ERNMENT VALIDA te that the above inform  Name & Tit	TION:	olete, true and correct Address  mplete, true and corre	Signature ect to the best of my know Total	Date  wledge and belief. weight of the ship	applicable) ment: kg	
7. GOVI I validat	Name  ERNMENT VALIDA  e that the above inform	ATION: nation is con	olete, true and correct Address  mplete, true and corre	Signature ect to the best of my know Total	Date  wledge and belief. weight of the ship	applicable) ment: kg	
7. GOVI I validat IMPOR 8. IMPO	Name  ERNMENT VALIDA that the above inform Name & Tit T SECTION DRTER CERTIFICA	ATION: nation is contile TION:	olete, true and correct Address  mplete, true and correct S	Signature ect to the best of my know Total	Date  wledge and belief. weight of the ship  Date	applicable) ment: kg	
7. GOVI I validat  IMPOR 8. IMPO I certify t	Name  ERNMENT VALIDA that the above inform Name & Tit T SECTION DRTER CERTIFICA	TION: nation is contile TION: ion is comp	olete, true and correct Address  mplete, true and correct S  olete, true and correct	Signature ect to the best of my know Total ignature  to the best of my knowle	Date  wledge and belief. weight of the ship  Date	applicable) ment: kg	
7. GOVI I validat  IMPOR 8. IMPO I certify t	Name ERNMENT VALIDA te that the above inform Name & Tit T SECTION ORTER CERTIFICA that the above informat	TION: nation is contile  TION: ion is comp	olete, true and correct Address  mplete, true and correct S  olete, true and correct	Signature ect to the best of my know Total ignature  to the best of my knowle	Date  wledge and belief. weight of the ship  Date	applicable) ment: kg	
7. GOVI I validat  IMPOR 8. IMPO I certify t	Name ERNMENT VALIDA e that the above inform Name & Tit T SECTION DRTER CERTIFICA that the above informat Certification (Interme	TION: nation is contile  TION: ion is comp	olete, true and correct Address  mplete, true and correct S  olete, true and correct cry/Entity/Fishing En	Signature ect to the best of my know Total ignature  to the best of my knowle	Date  wledge and belief.  weight of the ship  Date  edge and belief.	applicable)  ment: <u>kg</u> Government Seal	
7. GOVI I validat  IMPOR 8. IMPO I certify t Importer	Name ERNMENT VALIDA e that the above inform Name & Tit T SECTION DRTER CERTIFICA that the above informat Certification (Interme	TION: nation is contile  TION: ion is compliate Count	olete, true and correct Address  mplete, true and correct S  olete, true and correct try/Entity/Fishing En Address	Signature  ect to the best of my know  Total signature  to the best of my knowle tity)  Signature	Date  wledge and belief.  weight of the ship  Date  edge and belief.	applicable)  ment: <u>kg</u> Government Seal	
7. GOVI I validat  IMPOR 8. IMPO I certify t Importer	Name ERNMENT VALIDA that the above inform Name & Tit T SECTION DRTER CERTIFICA that the above informate Certification (Intermediate)	TION: nation is contile  TION: ion is compliate Count	olete, true and correct Address  mplete, true and correct S  olete, true and correct try/Entity/Fishing En Address	Signature  ect to the best of my know  Total signature  to the best of my knowle tity)  Signature	Date  wledge and belief.  weight of the ship  Date  edge and belief.	applicable)  ment: <u>kg</u> Government Seal	
7. GOVI I validat  IMPOR 8. IMPO I certify t Importer	Name ERNMENT VALIDA te that the above inform Name & Tit  T SECTION ORTER CERTIFICA that the above informate Certification (Intermed Name Certification (Intermed Name)	TION: nation is contacted TION: ion is completed diate Count	olete, true and correct Address  mplete, true and correct ry/Entity/Fishing En Address  ry/Entity/Fishing En Address	signature  ect to the best of my know  Total  ignature  to the best of my knowle tity)  Signature	Date  wledge and belief.  Date  Date  Date	applicable)  ment: kg  Government Seal  License # (if applicable)	
7. GOVI I validat  IMPOR 8. IMPO I certify t Importer	Name & Time Name Name Name Name Name Name Name	TION: nation is contile  TION: ion is compliate Countile diate Countile	olete, true and correct Address  mplete, true and correct ry/Entity/Fishing En Address rry/Entity/Fishing En Address f Shipment)	signature  ect to the best of my know Total vignature  to the best of my knowle tity) Signature  tity) Signature	Date  wledge and belief.  weight of the ship  Date  cdge and belief.  Date  Date	applicable)  ment: kg  Government Seal  License # (if applicable)  License # (if applicable)	
7. GOVI I validat  IMPOR 8. IMPO I certify t Importer	Name ERNMENT VALIDA te that the above inform Name & Tit  T SECTION ORTER CERTIFICA that the above informate Certification (Intermed Name Certification (Intermed Name)	TION: nation is contile  TION: ion is compliate Countile diate Countile	olete, true and correct Address  mplete, true and correct ry/Entity/Fishing En Address  ry/Entity/Fishing En Address	signature  ect to the best of my know  Total  ignature  to the best of my knowle tity)  Signature	Date  wledge and belief.  Date  Date  Date	applicable)  ment: kg  Government Seal  License # (if applicable)	
7. GOVI I validat  IMPOR 8. IMPO I certify t Importer  Importer	Name & Time Name Name Name Name Name Name Name	TION: nation is contile  TION: ion is compliate Countile diate Countile	olete, true and correct Address  mplete, true and correct ry/Entity/Fishing En Address rry/Entity/Fishing En Address f Shipment)	signature  ect to the best of my know Total vignature  to the best of my knowled tity) Signature  tity) Signature  Signature	Date  wledge and belief.  weight of the ship  Date  cdge and belief.  Date  Date	applicable)  ment: kg  Government Seal  License # (if applicable)  License # (if applicable)	

## ICCAT SWORDFISH STATISTICAL DOCUMENT INSTRUCTION SHEET

Pursuant to the 2001 ICCAT recommendation, swordfish imported into the territory of a Contracting Party or upon first entry into a regional economic organization must be accompanied by an ICCAT Swordfish Statistical Document (SWD) beginning January 1, 2003. Swordfish dealers who export or import swordfish from all ocean areas will be required to complete the appropriate sections of the SWD. Only complete and valid documents will guarantee that shipments of swordfish will be allowed to enter the customs territory of Contracting Parties (e.g., Japan, Canada, U.S., Spain, etc.). Improperly documented swordfish shipments (i.e., the SWD is either missing from the shipment, incomplete, invalid or falsified) will be considered illegitimate and contrary to ICCAT conservation efforts. Entry of improperly documented swordfish will be suspended (PENDING RECEIPT OF A PROPERLY COMPLETED DOCUMENT) into the customs territory of a Contracting Party or subject to administrative or other sanctions.

Please use the instructions below as a guide to complete the sections that apply to Exporters, Importers, and Government Validation. If a language other than English is used for description, please add an English translation either on the SWD or on a separate paper. Note: if a swordfish product is exported directly from the harvesting Country/Entity/Fishing Entity to a Contracting Party, without going through an intermediate Country/Entity/Fishing Entity, all fish can be identified on one document. However, if the swordfish product is exported through an intermediate Country/Entity/Fishing Entity (i.e., a Country/Entity/Fishing Entity other than the Country/Entity/Fishing Entity which is the final destination of the product), separate documents must be prepared for fish destined for different final destinations, or only one fish may be identified on a document to cope with any possible separation in an intermediate Country/Entity/Fishing Entity. Import of swordfish parts other than meat (i.e., heads, eyes, roe, guts, tails) may be allowed entry without an accompanying SWD.

**DOCUMENT NUMBER:** This block is for the issuing Country/Entity/Fishing Entity to designate a country coded Document Number.

- (1) FLAG COUNTRY/ENTITY/FISHING ENTITY Fill in the name of the Country/Entity/Fishing Entity of the vessel that harvested the swordfish in the shipment and issued this Document. According to the ICCAT Recommendation, only the flag state of the vessel that harvested the swordfish in the shipment, or, if the vessel is operating under a chartering arrangement, the exporting state, can issue this Document.
- (2) **DESCRIPTION OF VESSEL** (if applicable): Fill in the name, registration number, length overall (LOA) and ICCAT Record number of the vessel that harvested the swordfish in the shipment.
- (3) POINT OF EXPORT Identify the City and State or Province, and country/entity/fishing ent ity from which the swordfish was exported.
- (4) AREA OF CATCH Check the area of catch. (In case of (d) or (e) checked, items 4 and 5 need not be completed).
- (5) **DESCRIPTION OF FISH** The exporter must provide, to the highest degree of accuracy, the following information. (NOTE: One row should describe one product type.) (1) Product type: Identify the type of product being shipped as either FRESH or FROZEN, and in ROUND, GILLED AND GUTTED, DRESSED, FILLET or OTHER form. For OTHER, describe the type of products in the shipment; (2) Time of Harvest: Fill in the time of harvest (month and year) of the swordfish in the shipment; (3) Gear Code: Identify the gear type which was used to harvest the swordfish using the listed codes; (5) Net weight: Net product weight in kilograms.
- (6) EXPORTER CERTIFICATION The person or company exporting the swordfish shipment must provide his/her name, signature, address, date the shipment was exported, and dealer license number (if applicable). For countries that have adopted the ICCAT alternative minimum size for swordfish the exporter must certify that the listed Atlantic swordfish are greater than 15 kg (33 lb.) or if pieces, the pieces were derived from a swordfish weighing >15 kg.
- (7) GOVERNMENT VALIDATION Fill in name and full title of the official signing the SWD. The official must be employed by a competent authority of the flag state government of the vessel that harvested the swordfish appearing on the SWD or other individual or institution authorized by the flag state or if the vessel is operating under a charter arrangement, by a government official or other authorized individual or institution of the exporting state. Net weight must also be certified and recorded The substitutional measure described in paragraphs A-D of the *Resolution by ICCAT concerning Validation by a Government Official of the Bluefin Tuna Statistical Document* [93-2], adopted by the Commission in 1993, may be applied to the above requirements for the validations in this Swordfish Statistical Document Program.

(8) IMPORTER CERTIFICATION - The person or company that imports swordfish must provide their name, signature, address, date the swordfish was imported, license number (if applicable) and final point of import. This includes imports into intermediate countries, entities or fishing entities. For fresh and chilled products, signature of the importer may be subs

SWO

At. SOUTH

signature is properly accredited to the company

GEAR CODE	<b>GEAR TYPE</b>
BB	Baitboat
GILL	Gillnet
HAND	Handline
HARP	Harpoon
LL	Longline
MWT	Mid-water trawl
PS	Purse seine
RR	Rod and reel
SPHL	Sport handline
CDOD	0 .01 . 1

SPOR Sport fisheries, unclassified SURF Surface fisheries, unclassified

TL Tended line TRAP Trap TROL Troll

UNCL Unspecified methods

OT Other type: Describe the type of gear

Original completed document must accompany exported shipment. Retain a copy for your records. The original (imports) or a copy (exports) must be postmarked and mailed, or faxed, within 24 hours of import or export to: XXXX