FOR HIRE DIVE/SNORKEL OPERATIONS

IMPORTANT INFORMATION ABOUT THIS INFORMATION COLLECTION

1. Authorizations to Collect the Information

The National Marine Sanctuaries Act (16 USC 1431, et seq.) authorizes the Grays Reef National Marine Sanctuary to establish regulations to protect sanctuary resources or resolve user conflicts. This act also authorizes the Sanctuary to do research and collect information necessary for evaluating new regulations or monitoring the effects of existing and new regulations.

2. How the Information Will Be Used

The Grays Reef National Marine Sanctuary has developed a public process to evaluate and revise its current management plan and regulations. Through this public process and in consultation with the Sanctuary Advisory Council, the Grays Reef National Marine Sanctuary has revised its regulations to include a prohibition on spear fishing. In addition, alternatives have been evaluated a preferred alternative submitted to review and clearance in the regulatory process to create a research only area. The information will be used in monitoring and evaluating the socioeconomic impacts of Sanctuary management strategies and regulations.

3. Statement of Burden

Public reporting burden for this collection of information is estimated to average about three hours per response, including 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 burden, to Dr. Vernon R. (Bob) Leeworthy, Chief Economist, National Ocean Service, office of National marine Sanctuaries, 1305 East West Highway, SSMC 4, 11th floor, Silver Spring, MD 20910. Reference OMB Control Number 0648-xxxx, Expiration Date: xxxxxxxxx.

4. Your Participation and Protections of Proprietary Information

Your participation is voluntary. 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 the collection of information displays a currently valid OMB Control Number.

The information in this survey will be treated as sensitive and protected to the extent that it satisfies the criteria for exemption under the Freedom of Information Act (FOIA), 5 U.S.C. §552, and the Trade Secrets Act, 18 U.S.C. §1905. Any identifying information (name, name of business, address and telephone number) will be viewed only by the contractor while collecting and compiling the data. The contractor will destroy the identifying information when the databases are transmitted to NOAA.

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Date of Interview Location of Interview:	OMB No. 0648-xxxx Exp. Date: xxxxxxxxxxx
	re Dive Operations in the Georgia and GRNMS (Part 1)
GENERAL INFORMATION	<u>I</u>
Name	
Telephone	
E-mail:	
Address:	
1. Which of the following inc	cludes your age?
18-30 31-40 41-50 51-60 ov	ver 60
2a. Are you Hispanic or Latino	YES NO
2b. What is your race? (Mark	one or more)
White Black or African	American American Indian or Alaska Native
AsianNative Hawaiian	or Other Pacific Islander
3. How many family members	do you support (including yourself)?
Myself only 2 3 4 5 6 7 0	Greater and 7
4. Are you a member of any of	f the following groups?
a. NAUI b. PADI c. SSI d. Chamber of Commerce e. An Environmental Group f. Other (specify)	YES NO YES NO YES NO YES NO YES NO YES NO
5. What is your primary port/n	narina?
6. Do you have a secondary po	ort/marina, from where you dive part of the year? YES 1
- If YES, then which one	?
7. How many years have you b	peen a dive/snorkel operator? (number of years)

Date of Interview OME Location of Interview:	3 No. 0648-xxxx Exp. Date: xxxxxxxxxxxx
8. How many years have you been a d Georgia? (number of years)	ive/snorkel operator in the ocean & coastal areas off
9. Have you ever taken dive/snorkeler (Interviewer—Please show map) YES	s to the Grays Reef National Marine Sanctuary? NO
- If YES, how many years have y Marine Sanctuary? (number	you taken dive/snorkelers to the Grays Reef National er of years)
10. What approximate percentage of y operation?%	our total business income is derived from the dive/snorkel
11. What approximate percentage of y dive/snorkel operation? %	our TOTAL personal income is derived from the
12. What approximate percentage of y dive/snorkel operation? %	our TOTAL household income is derived from the
13. How would you describe your dive	e/snorkel operation? (Mark one or more)
Full-time dive/snorkel operation Seasonal dive/snorkel operation	Part-time dive/snorkel operation If seasonal, what months
Full-time Combination dive/snorke	el, fishing, and wildlife observation operation l, fishing, and wildlife observation
Part-time Combination dive/snorkel	l, fishing, and wildlife observation , fishing, and wildlife observation If seasonal, what
Months for dive/snorkel	
Months for fishing Months for wildlife observation	
widing observation	
ECONOMIC INFORMATION	
14. Number of boats/vessels at the ope	eration: (number of vessels)
15. Capacity of dive/snorkelers per ve	ssel in operation:
Vessel 1:divers/snorkelers Vessel 3:divers/snorkelers	s Vessel 2:divers/snorkelers s Vessel 4:divers/snorkelers
16. Capacity of fishers per vessel in op	peration:
Vessel 1:fishers Vessel 2: Vessel 3:fishers Vessel 4:	

Date of Interview OMB No. 0648-xxxx Exp Location of Interview:	o. Date: xxxxxxxxxxx
Location of interview.	
17. Capacity of wildlife observes per vessel in operation:	
Vessel 1:wildlife observers Vessel 2:wildlife	
Vessel 3:wildlife observers Vessel 4:wildlife	e observers
18. Number of employees at the operation: a. Full time b. Part time c. Seasonal	_
19. Please provide your best estimate of the replacement valued last year (fill in year).	alue of the following items that you
a. Vessel(s) and electronic equipment:	\$
b. Diving and snorkeling gear:	\$ \$ \$
c. Compressors	\$
d. Rods/Reels	\$
e. Other gear (specify)	ф
20. Outstanding balance on loan amounts for vessels and ed21. Please provide your best estimate for the following exp	
Permits/Licenses:	\$
Docking fees:	\$ \$ \$ \$
Interest payments on vessel(s):	\$
P&I insurance on vessel(s)	\$
Maintenance/repair on vessel/electronic equipment:	\$
Maintenance/repair on dive/snorkel gear:	\$
Maintenance on rods/reels:	\$
Maintenance/repair on compressors: Maintenance/repair on other equipment:	\$ \$
Other Dive equipment costs:	\$
Advertising:	\$
Office rent/mortgage:	\$
Office utilities (electric, water, telephone, Internet):	\$
Depreciation of vessels and equipment:	\$
Business Taxes:	\$
Other:	<u> </u>
	<u> </u>
	<u> </u>

Date of Interview OMB No. 0648-	xxxx Exp. Date:	XXXXXXXXXX
Location of Interview:		
22. Please provide your best estimate for the follo	wing trip related	expenses last year:
Dive equipment costs:		\$
Fuel/oil:		\$
Ice:		\$
Food/Supplies:		\$
Bait:		\$
Captain wages & salaries (if not owner-captain):		\$
Crew wages & salaries Number:		\$
Other (specify)		\$
		\$
		\$
23. Please provide your best estimate of your total \$	l business revenu	es last year:
24. Please provide your best estimate of your total	l revenues and/or	percent of total revenues
(from Question 23) last year by each geographic as		-
All Areas Georgia and GRNMS Georgia outside GRNMS Inside GRNMS	\$ \$ \$	% % % %

Date of Interview	OMB No. 0648-xxxx Exp. Date: xxxxxxxxxxx
Location of Interview:	

PERSON DAYS AND TRIP COSTS

25. Please provide your best estimate of the number person days by type of activity for last year and the percentage of person days by activity and area. (Interviewer – show map of areas). A person day is one person for a whole day or any part of a day. 10 people on-board for an overnight trip would be 20 person days.

Activity	Total Person- days	All Areas (%)	Georgia Outside GRNMS (%)	Inside GRNMS (%)
SCUBA diving				
Snorkelers				
Fishing				
Wildlife Observation				
All Activities				

26. Please provide your best estimate of the cost per day for a typical day of operation by activity.

Activity	Fuel/Oil	Ice	Bait	Food/	Other	Crew	Captain
				Supplies			(if not owner)
SCUBA diving							
Snorkeling							
Fishing							
Wildlife Observation							

27. Please provide the percentage of your person days of operation across each 1-minute by 1-minute grid cell for each activity. This is a forward looking rather than just your past activity patterns. We want to know where you expect you will conduct your activities in the future. This will be used to assess the possible impacts of any future zoning of areas by GRNMS.

Coding sheet attached.

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For Hire Dive/Snorkel Operators in Georgia Part 2. SOURCES OF INFORMATION AND PERCEPTIONS

zones was open and fair to all groups.

4 5 I don't know

2

 Please check the sources of information 	tion that you have rece	ived in the past on the	meet	ing on the
GRNMS and score them to your level o little trust, 3=neither trust nor distrust, 4			1	2
	Sources	Trust	5. N	NOAA ha
SOURCE	Used	Sources	deve	loping ru
a. GRNNMS website	0000	5041005		
b. GRNMS Staff			1	2
c. Sanctuary Advisory Council				
d. GRNMS brochures/literature				
e. Internet				NOAA ha
f. Information in newspapers			regul	ations fo
g. Radio				
h. TV			1	2
i. Social Media (Twitter, You Tube)				
j. Word of mouth				
k. SCUBA diving magazines/newslett	ers)			Once that
1. Others (specify, including people like		ther divers, a local	avera	ige perso
community leader, family member,	friend, etc>)			•
			1	2
			0 7	٦
				he proce
For the next set of questions, please pro-			regui	ations ha
Strongly agree, 2 means Moderately a	0 -	, 4 means Moderately	1	2
disagree, and 5 means Strongly disagre	ee		1	2
2. The process that NOAA has used to	develop rules and regu	lations for the GRNMS was		
open and fair to all groups.				
1 2 3 4 5 I do	on't know			
3. The process has used by NOAA to do	evelop boundaries and	regulations for the GRNNMS		

					e average person participated in the workshops and the average person could not influence the final decisions.					
1	2	3	4	5	I don't know					
					concerns of other federal and state governments in for the GRNMS.					
1	2	3	4	5	I don't know					
	NOAA l ılations f				concerns of individual citizens in developing rules and					
1	2	3	4	5	I don't know					
					tions have been in effect, there has been no way that the binion on the usefulness of the regulations.					
1	2	3	4	5	I don't know					
	The proculations h				as established to deal with violations of GRNMS t.					
1	2	3	4	5	I don't know					
	NOTES									

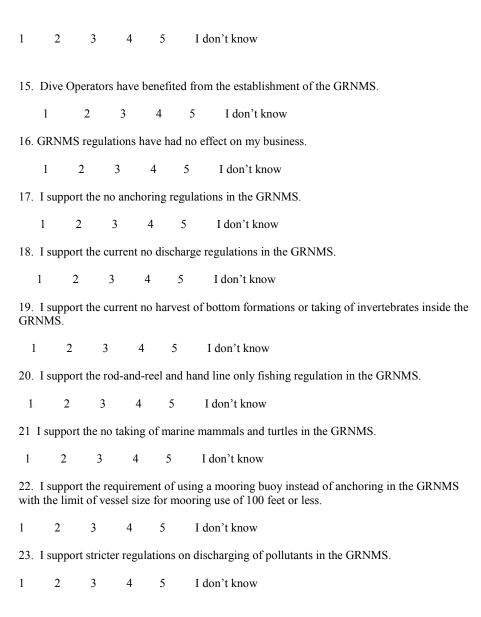
OMB No. 0648-xxxx. Expiration date: xxxxxxxxx.

ATTITUDES ABOUT MANAGEMENT STRATEGIES AND REGULATION In this section, we want to know what you think about current and proposed management strategies in the GRNMS, the effects of those management strategies and regulations, and how you think the GRNNMS management has performed. In management plan review public scoping and Sanctuary Advisory Council meetings, GRNMS has recently expanded its regulations to include a prohibition on spear fishing. In addition, in consultation with the Sanctuary Advisory Council and public meetings, GRNMS has evaluated several alternatives for a research only area in which all activities would be prohibited, except research and education. For the next set of questions, please provide your answer on a 1 to 5 scale, where 1 means Strongly agree, 2 means Moderately agree, 3 means Neutral, 4 means Moderately disagree, and 5 means Strongly disagree 9. I support the GRNMS as it is currently established. I don't know 10. I support the establishment of a research only area in the GRNMS. I don't know 11. A research only area in the GRNMS would have a positive impact on the marine environment. I don't know 12. There should be more areas set aside as a research only area in the GRNMS. 2 5 I don't know 13. I support the prohibition of spear fishing in GRNMS.

I don't know

14. There has been a net economic benefit to the coastal Georgia economy from the

establishment of the GRNMS.



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24. Please rate the status/condition of the following resources at the GRNMS by their status/condition since the implementation of the GRNMS (1981), where 1 is much better and 5 is much worse.

	RESOURCE	Better	←		·→ \	Vors	e
a.	Water quality	1	2	3	4	5	N/A
b.	Sea-based pollution/marine debris	1	2	3	4	5	N/A
c.	Live bottom	1	2	3	4	5	N/A
d.	Other bottom habitat	1	2	3	4	5	N/A
e.	Fish populations (bottom fish)	1	2	3	4	5	N/A
f.	Fish populations (other fish)	1	2	3	4	5	N/A
g.	Fish population (diversity)	1	2	3	4	5	N/A
h.	Other sea life (abundance)	1	2	3	4	5	N/A
i.	Other sea life (diversity)	1	2	3	4	5	N/A
j.	Mooring buoys	1	2	3	4	5	N/A
k.	Invasive species (lionfish)	1	2	3	4	5	N/A

25.	The GRNMS is	s mostly res	ponsible for	the status/con	dition of the	resources that	you rated in the	previous a	uestion.

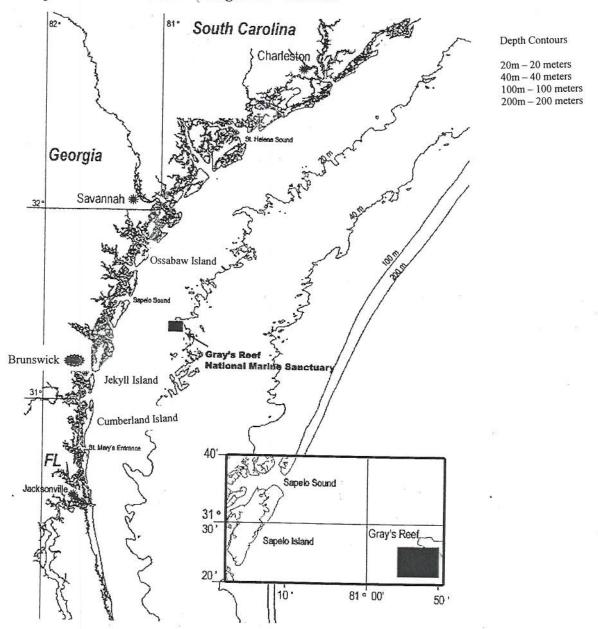
1 2 3 4 5 I don't know

26. In which area(s) has the GRNMS been most successful?

27. In which area(s) has the GRNMS been least successful?

Definition. Ocean areas include the Atlantic Ocean and coastal areas include inland bays, estuaries and tidally influenced portions of rivers where fresh and saltwater mix.

Map of Coastal & Ocean Georgia and GRNMS



- Grays Reef National Marine Sanctuary (GRNMS) is located 16 miles offshore of Sapelo Island, Georgia.
- GRNMS is 22-square miles and contains rocky ledges and sandy flats.
- GRNMS is a popular recreational fishing site with some diving.
- No commercial fishing currently takes place in GRNMS, but it is not prohibited.