NMFS NORTHEAST VESSEL MONITORING PROGRAM

FISHING VESSEL NAME	i:					
NMFS FISHERIES PERM	IIT NUMBE	ER:				
COAST GUARD DOCUM	IENTATIO	N/STATE R	EGISTRATION	ON NUMBER:		
MONITORING FOR (CIR	CLE <u>ALL</u>	ΓHAT APP	LY):			
SCALLOP MULTISPE						
As required by 50 CFF VMS unit operation and Law Enforcement (OL position reports (and a received by NMFS OL requirements until cor	R 648.10(end commu E) at (978 an activity E. Your v nnectivity	e)(1)(ii) an inications) 281-921; y declarat ressel is r with NMI	d (iii), the vacue to service to 3. This is nation) are author regarded is v	essel owner mu NMFS by callin ecessary to ens comatically sent d as meeting the	ust confi g the Of sure that t to and e VMS	irm the ifice of t
*** PLEASE COMPLETE	THIS FOR	RM BY PRO	OVIDING ALI	REQUESTED IN	NFORMA	TION ***
I CERTIFY THAT SUBJECT	T FISHING	VESSEL HA	S AN <u>OPERA</u>	TIONAL VMS UNIT	INSTALL	.ED BY:
PURCHASED FROM:	BOATRAC	S	SKYMATE	THRANE	E & THRAN	1E
INSTALLING DEALER:	NAME, AD	DRESS AND	TELEPHONE	NUMBER:		
DATE OF INSTALLATION:						
SERIAL NUMBER OF VMS UN	NIT:					
E-MAIL ADDRESS OF VESSE	iL:					
VMS UNIT ACTIVATED ON VESSEL AND READY TO SEND FISHING ACTIVITY				ACTIVITY CODES?	☐ YES	□ NO
VMS UNIT OPERATING INSTRUCTIONS SENT TO VESSEL OWNER BY VMS VI				BY VMS VENDOR?	□ YES	□ NO
VESSEL OWNER TRAINED ON USE OF VMS UNIT BY VMS VENDOR?					□ YES	□ NO
I UNDERSTAND THAT THE V AT ALL TIMES. I ALSO UNDE OF 50 CFR §648.9 AND §648. FROM THE VMS VENDOR LIS	MS UNIT MUERSTAND TH 10 REGARD STED ABOV	JST REMAIN HAT I AM SU DING USE OF E AND UNDE	CONNECTED BJECT TO THE THE VMS. I H ERSTAND HOW	TO THE VMS VEND PROVISIONS AND AVE RECEIVED INS TO OPERATE THE	OR LISTEL REQUIREN TRUCTION VMS UNIT	D ABOVE MENTS NS
PERMIT HOLDER'S NAME (p						
PERMIT HOLDER'S SIGNATURE:				DATF.		

SEND THIS ORIGINAL, COMPLETED FORM TO:

NOAA FISHERIES NE OFFICE OF LAW ENFORCEMENT 55 GREAT REPUBLIC DRIVE GLOUCESTER, MA 01930 ATTN: VMS PROGRAM

or fax to 1-978-281-9317

OMB# 0648-0202 Expires 11/30/2009 OMB# 0648-0558 Expires 06/30/2010

Public reporting burden for this collection of information is estimated to average 5 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or suggestions for reducing this burden to: Patricia A. Kurkul, Regional Administrator, Northeast Region, NMFS, 55 Great Republic Drive, Gloucester, MA 01930-2276; and to Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

The information will be used in the management of the Atlantic sea scallop, Northeast multispecies, monkfish, herring and surfclam/ocean quahog fisheries by insuring compliance with VMS regulations listed under 50 CFR §648.9 and §648.10 (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. Any information submitted by any person to obtain a permit is not confidential, and may be disclosed upon request.