

http://www.fws.gov/crabtag/ Fish and Wildlife Service Home... Horseshoe Crab



Horseshoe Crab Resighting Form

NOTE: This form is not compatible with Firefox. Please use Internet Explorer.

The Maryland Fishery Resources Office has been coordinating a coast-wide tagging program for horseshoe crabs since 1999. Crabs have been tagged by researchers and biomedical companies conducting numerous studies on horseshoe crabs along the Atlantic Coast. Although all tags have a toll-free phone number for reporting the information, we are also providing an online reporting method for your convenience.

Please complete the following form. When finished, select the submit button at the bottom of the page. If you have any questions or comments or would like to report this information over the phone, please call 1-888-546-8587.

Circular white tag (attached to left corner of shell by a plastic pin):

1. Tag number:
2. Tag Removed or Found Detached? Yes No
3. What is the condition of the horseshoe crab? Alive Dead Unknown (tag only found)
4. Date of Capture/Found? mm/dd/yyyy
5. Disposition of horseshoe crab?
 - Released Alive
 - Found Dead
 - Kept for Bait
 - Sold or Bought

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5. Disposition of horseshoe crab?
 - Released Alive
 - Found Dead
 - Kept for Bait
 - Sold or Bought
 - Tag Found Only
6. Finder:
 - Beach Comber (walking the Beach)
 - Biomedical Company
 - Shorebird Surveyor
 - Commercial Fisherman
 - Horseshoe Crab Spawning Surveyor
7. How did you find or capture the crab?
 - Hand/Found on Beach
 - Dredge
 - Hook & Line/Rod & Reel
 - Trawl
 - Gillnet
 - Pound/Trap/Fyke Net
8. In what state did you find or capture the horseshoe crab?
9. What was the name of the body of water where you captured/found the horseshoe crab? (i.e. Atlantic Ocean, Delaware Bay, Long Island Sound, etc.)

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9. What was the name of the body of water where you captured/found the horseshoe crab? (i.e. Atlantic Ocean, Delaware Bay, Long Island Sound, etc.)

10. What was the nearest town or city to the capture/found location?

11. What was the specific location or beach name where crab was seen?

Latitude (optional):

Longitude (optional):

With this program, we can send you information about where and when the crab was originally tagged and released. Please indicate how you would like to receive information about the crab that you found:

- Postal Mail Certificate (will receive pewter horseshoe crab pin for first crab tag reported from the mailing address you provide below)
- Email Certificate (will arrive as an attachment, provide email address below)
- Email Message (information in the body of the email, but no certificate attached, provide email address below)
- I do not wish to receive any information

Mailing Address:

Mailing Address2:

City:

State: Country: USA Zip Code:

Email Address:

Comments: (optional 250 character limit)

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Mailing Address:

Mailing Address2:

City:

State: Country: USA Zip Code:

Email Address:

Comments: (optional 250 character limit)

OMB Control No. 1018-0127
Expires 05/31/2015

Privacy Act and Paperwork Reduction Act Notices

In accordance with the Privacy Act (5 U.S.C. 552a) and the Paperwork Reduction Act (44 U.S.C. 3501), please note the following information:

1. We conduct this tagging program under the authority of the Fish and Wildlife Act of 1956 (16 U.S.C. 742f), the Wildlife Coordination Act (16 U.S.C. 661-666c), and the Anadromous Fish Conservation Act (16 U.S.C. 757a-757g).
2. Your response is voluntary. We will remove all names and identifying information when we compile the results and only summary information will be reported. The horseshoe crab tagging program provides vital information to fishery managers about the migration patterns, distribution, and abundance of horseshoe crabs along the Atlantic coast. The information is

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3. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. This information collection has been approved by OMB and assigned clearance number 1018-0127.
4. We estimate that it will take you 10 minutes to complete this report. This burden estimate includes time for reviewing instructions, gathering data, and completing and reviewing the form.
5. Comments regarding the burden estimate or any other aspect of the form may be directed to the Service Information Clearance Officer, Fish and Wildlife Service, MS 2042-PDM , 4401 N. Fairfax Drive, Arlington, VA 22203.

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