Revised: 04/ <del>0</del> 3/2012			_	OMB Contro	ol No. 0648-0213 Expi	ration Date: 03/31/2015	
CHECK-IN/CHECK-OUT REPORT SHORESIDE PROCESSOR			Original Report Revised Report	NOAA Fishe National Mar P.O. Box 216 Juneau, AK 9 Fax: 907-586 Telephone: 9	rine Fisheries Service 668 99802 6-7131	TO ATMOSPACING CONTROL OF CONTROL	
Processor Name				ADF&G Pro	ocessor Code		
				Federal Pro	Federal Processor Permit Number		
Representative Name				Business Te	Business Telephone Number		
				Business FAX Number			
[_] (a) Beginnin	report, check (a) or (b)	If a stagive la where	gin to receive gr to receive or pro- ationary floating atitude and longing receiving groun	processor, tude of position			
	FISH OR FISI	H PRODUC	T HELD AT	PLANT (CI	heck lb or mt)		
SPECIES CODE	PRODUCT CODE	PRODUCT WEIGHT Ib 0.001 m		SPECIES CODE	PRODUCT CODE	PRODUCT WEIGHT  [] lb  [] 0.001 mt	

# PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 8 minutes per response, including the time for reviewing the instructions, searching the existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Assistant Regional Administrator, Sustainable Fisheries Division, NOAA National Marine Fisheries Service, P.O. Box 21668, Juneau, AK 99802-1668.

ADDITIONAL INFORMATION

Before completing this form, please note the following: 1) Notwithstanding any other provision of 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; 2) This information is mandatory and is required to manage commercial fishing efforts under 50 CFR part 679 and under section 402(a) of the Magnuson-Stevens Act (16 U.S.C. 1801, et seq.); 3) Responses to this information request are confidential under section 402(b) of the Magnuson-Stevens Act. They are also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics.

## Instructions for

# CHECK-IN/CHECK-OUT REPORT, SHORESIDE PROCESSOR

A shoreside processor or stationary floating processor (SFP) is active when receiving or processing groundfish.

The manager of a shoreside processor or SFP must submit to NMFS a check—in report (BEGIN message) prior to becoming active and a check—out report (CEASE message) for every check—in report submitted.

The check-in report and check-out report must be submitted by fax to 907-586-7131.

## TIME LIMITS AND SUBMITTAL

Except as indicated above, the manager must submit a check-in report and a check-out report according to the following table

For	Submit a BEGIN message	Submit a CEASE message
Change of	If continually active through the end of one	If a check-out report was not previously
fishing year	fishing year and at the beginning of a second	submitted during a fishing year, submit a check-
	fishing year, submit a check-in to start the	out report on December 31.
	year on January 1.	
Interruption of	n/a	If receipt of groundfish is expected to stop for at
production		least one month during the fishing year and then
		start up again, the manager or operator may
		choose to submit a check-out report.
Change of	Before receiving groundfish	Upon completion of receipt of groundfish from a
location, if		position and before movement from that
AFA SFP		position.

# CHECK-IN AND CHECK-OUT REPORT REQUIREMENTS

The manager of a shoreside processor or SFP must record the information from the following table on a check—in report and a check—out report, as appropriate.

Required information	Check-in	Check-out
Whether an original or revised report	X	X
Processor name, ADF&G processor code, FPP number	X	X
Representative name, business telephone number, business fax number	X	X
Enter date facility will begin to receive or process groundfish	X	
Enter date facility ceased to receive or process groundfish		X
If SFP, position where receiving groundfish in latitude and longitude	X	
Indicate whether this is a check-in report. If YES, indicate		
If checking-in for the first time this fishing year	X	
If checking-in to restart receipt and processing of groundfish after filing a check—out	X	
report		
Indicate whether this is a check-out report		
If YES, enter date facility ceased to receive or process groundfish		X
Indicate product weight of all fish or fish products (including non-groundfish) remaining	X	X
at the facility (other than public cold storage) by species code and product code. Indicate		
if recorded to the nearest pound or to the nearest 0.001 mt.		