

## REPORTING FORM FOR THE TRIP INTERVIEW PROGRAM (TIP)

Next Row is for Data Entry Personnel Use Only

PC Data Entry by:		Date:		Batch		Interview #:	
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### SECTION I

Interview Number												
Fishery Codes	CP	RF	OP		IN	ML	BF		EG	MX	SL	
Trip Type	030	100	200	300	400	600	675	676	735	900		
Agent Code or Name			OR									
Date of Interview												
	Month		Day		Year							
Reporting Area of Landings												
	Reporting State				Reporting County				Reporting Area Zipcode			
Sampling Site												
	State		County		Zipcode		Sampling Location Code (Dealer or MRFSS)					
Start / End Date of Trip												
	Start Month		Start Day		Start Year		End Month		End Day		End Year	
Information Source	SR		LB	CI	SS		SI		OD		SO	
	Sales Records		Logs		Site Sampling		Recs and Int		Observer Data		Recs and Observ	
Fishing Mode	CM		CP		HB		PR		TR		SS	
	Commercial		Charter/Party		Head Boat		Private Rec		Torunament		Scientific Survey	
Time of Data Collection -24hr	Begin	:			End	:						
		Hour	Minutes			Hour	Minutes					
Bias Type	NB		SB		EB		SE		NI			
	No Bias		Size Bias		Effort Bias		Size & Effort		No Information			
Interview Type	FS			DS			TS			AT		
	Fisherman Sample			Dealer Sample			Trip Survey			Angler Trip		
Landings Type	CL			IL			NL			NF		
	Complete Landings (weight)			Incomplete Landings			No Landings			No Fish Caught		
Crew Size					(The number of crew including the captain)							
Total Effort	----	-----	UK	NR	WR	EQ	NF	SA	WI	OB	QR	
	Days Out		Days Fished		Termination Code							
Vessel Information												
	Vessel ID				Vessel Length (feet)				Vessel Name			

### SECTION II

Gear Information				Effort / Location			
Code	Number	Quantity	Other	Soak Time (Hours)	Area Fished	Depth Range (Fathoms)	
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