



SITE DESCRIPTION FORM - LARGE PELAGICS BIOLOGICAL SURVEY



BIOS

INTERVIEWER CODE

INTERVIEW DATE (MM / DD)

STATE CODE

CONTROL NUMBER

SITE # 1 NAME

SITE # 1 CODE

COUNTY CODE # 1

CALIBRATED HANDHELD SCALE USED TO OBTAIN WEIGHTS?

 YES
 NO

SITE REPRESENTATIVE NAME (IF PRESENT)

CERTIFIED SCALE ON PREMISES USED TO OBTAIN WEIGHTS?

 YES
 NO

SITE REPRESENTATIVE TELEPHONE NUMBER

SCALE CERTIFICATION DATE (MM / DD / YYYY)

SCALE CERTIFYING AGENCY

SITE REPRESENTATIVE SIGN-IN INITIALS

TIME OF SIGN -IN INITIALS

SITE REPRESENTATIVE SIGN-OUT INITIALS

TIME OF SIGN -OUT INITIALS



SITE # 2 NAME

SITE # 2 CODE

COUNTY CODE # 2

CALIBRATED HANDHELD SCALE USED TO OBTAIN WEIGHTS?

 YES
 NO

SITE REPRESENTATIVE NAME (IF PRESENT)

CERTIFIED SCALE ON PREMISES USED TO OBTAIN WEIGHTS?

 YES
 NO

SITE REPRESENTATIVE TELEPHONE NUMBER

SCALE CERTIFICATION DATE (MM / DD / YYYY)

SCALE CERTIFYING AGENCY

SITE REPRESENTATIVE SIGN-IN INITIALS

TIME OF SIGN -IN INITIALS

SITE REPRESENTATIVE SIGN-OUT INITIALS

TIME OF SIGN -OUT INITIALS



SITE # 3 NAME

SITE # 3 CODE

COUNTY CODE # 3

CALIBRATED HANDHELD SCALE USED TO OBTAIN WEIGHTS?

 YES
 NO

SITE REPRESENTATIVE NAME (IF PRESENT)

CERTIFIED SCALE ON PREMISES USED TO OBTAIN WEIGHTS?

 YES
 NO

SITE REPRESENTATIVE TELEPHONE NUMBER

SCALE CERTIFICATION DATE (MM / DD / YYYY)

SCALE CERTIFYING AGENCY

SITE REPRESENTATIVE SIGN-IN INITIALS

TIME OF SIGN -IN INITIALS

SITE REPRESENTATIVE SIGN-OUT INITIALS

TIME OF SIGN -OUT INITIALS



COMMENTS:



Date _____	Date _____	Date _____	Date _____
Control # _____	Control # _____	Control # _____	Control # _____
Document # _____	Document # _____	Document # _____	Document # _____
Fish # _____	Fish # _____	Fish # _____	Fish # _____
Species _____	Species _____	Species _____	Species _____
SFL _____	SFL _____	SFL _____	SFL _____
CFL _____	CFL _____	CFL _____	CFL _____
TYPE	TYPE	TYPE	TYPE
Date _____	Date _____	Date _____	Date _____
Control # _____	Control # _____	Control # _____	Control # _____
Document # _____	Document # _____	Document # _____	Document # _____
Fish # _____	Fish # _____	Fish # _____	Fish # _____
Species _____	Species _____	Species _____	Species _____
SFL _____	SFL _____	SFL _____	SFL _____
CFL _____	CFL _____	CFL _____	CFL _____
TYPE	TYPE	TYPE	TYPE
Date _____	Date _____	Date _____	Date _____
Control # _____	Control # _____	Control # _____	Control # _____
Document # _____	Document # _____	Document # _____	Document # _____
Fish # _____	Fish # _____	Fish # _____	Fish # _____
Species _____	Species _____	Species _____	Species _____
SFL _____	SFL _____	SFL _____	SFL _____
CFL _____	CFL _____	CFL _____	CFL _____
TYPE	TYPE	TYPE	TYPE