



**SEA OTTER
TAGGING
CERTIFICATES**



DEPARTMENT OF THE INTERIOR
U.S. FISH & WILDLIFE SERVICE

OMB Control No. 1018-0066
Expires #####

SEA OTTER CERTIFICATE #

Tagging Date _____ (1)

Hide Tag Number _____ (2) Skull Tag Number _____ (3)

Tagging Location _____ (4) FWS # _____ (5)

Village Hunted From (if Different) _____ (6)

Age Class (7)	Sex (8)	Sex Identifier (9)
Adult _____	Male _____	Penis Sheath _____
Sub Adult _____	Female _____	Vaginal Orifice _____
Pup _____	Unknown _____	Teats _____ None _____

Specimens Collected (10)

Tooth _____ Muscle Vial _____
 Whisker _____ Carcass _____
 Other _____ Other _____

Number of Otters Present in Pod _____ Number of Otters Harvested from This Pod _____ (11)

Date of Kill _____ (12) Location of Kill (Be Specific) _____ (13)

GPS: Latitude _____ (14) Longitude _____

Remarks _____ (15)

Signature of Tagger _____ (16)

Name of Hunter (Print) _____ (17)

Signature of Hunter _____ (18)

Instructions on Inside of Front Cover

WHITE-ORIGINAL PINK-HUNTER'S COPY YELLOW-TAGGER'S COPY

APP 3 - 7 - 89

FWS Form 3-2416
Rev. 03/2020

INSTRUCTIONS FOR SEA OTTER FORM

1. Date when tagging takes place.
2. Number from tag attached to the hide.
3. Number from tag attached to the skull.
4. Village where hide and skull are tagged.
5. Usually left blank. This space is for an assigned number when a detailed necropsy is performed and multiple samples are collected. A reference number here will allow us to relate samples to one animal.
6. Village otter was hunted from if different than the tagging village.
7. Estimated age class of sea otter: Adult – large size; Sub Adult – Intermediate size; Pup – small size, young of year.
8. Sex of animal. Unknown when not absolutely sure.
9. How sex was determined.
10. Record biological specimens collected, preserved and presented to tagger.
11. How many otters were present at kill location and how many otters were harvested from that pod.
12. Record the date when the sea otter was killed; month, day, and year.
13. Identify specifically where this sea otter was killed. List distance from nearest island, river, bay, or other geographic feature.
14. The GPS coordinates of kill location.
15. Enter any other information that may be important, like any unusual conditions or behavior of the otter.
16. The tagger signs here.
17. Print the name of the hunter.
18. The hunter or owner signs here.

**After completing certificate, give pink copy to hunter, return white copy to our office,
 U.S. Fish and Wildlife Service / Marine Mammals Management
 Marking, Tagging, and Reporting
 1011 East Tudor Road MS341
 Anchorage, AK 99503
 and retain the yellow copy in book for your records.**



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Remarks _____

Signature of Tagger _____

Name of Hunter (Print) _____

Signature of Hunter _____

Instructions on Inside of Front Cover

WHITE-ORIGINAL PINK-HUNTER'S COPY YELLOW-TAGGER'S COPY

NOTICES

PRIVACY ACT STATEMENT

Authority: 16 U.S.C. 1361-1407, as amended; 50 CFR § 18.23(f).

Purpose: FWS will use this information to monitor marine mammal harvests.

Routine Uses: This information may be shared in accordance with the Privacy Act of 1974 and the routine uses identified in System of Records Notice INTERIOR/FWS-30, Marine Mammals Management, Marking, Tagging and Reporting Program.

Disclosure: Furnishing this information is voluntary; failure to provide all the requested information may limit FWS' ability to monitor marine mammal harvests.

PAPERWORK REDUCTION ACT STATEMENT

In accordance with the Paperwork Reduction Act (44 U.S.C. 3501), the U.S. Fish and Wildlife Service collects information necessary to monitor the subsistence harvest of sea otter and will be used to obtain essential biological data necessary to manage the species, and to respond to requests made under the Freedom of Information Act and the Privacy Act of 1974. Information requested in this form is voluntary. According to the Paperwork Reduction Act of 1995, 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. OMB has approved this collection of information and assigned Control No. 1018-0066.

ESTIMATED BURDEN STATEMENT

The relevant burden to report information required on this form and have the specified parts marked or tagged is 15 minutes, including time for reviewing instructions, gathering and maintaining data and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of the form to the Service Information Clearance Officer, U.S. Fish and Wildlife Service, U.S. Department of the Interior, 5275 Leesburg Pike, MS: PRB/PERMA (JAO), Falls Church, VA 22041-3803, or via email at Info_Coll@fws.gov. Please do not send your completed form to this address.

FREEDOM OF INFORMATION ACT STATEMENT

For organizations, businesses, or individuals operating as a business (i.e., permittees not covered by the Privacy Act), we request that you identify any information that should be considered privileged and confidential business information to allow the Service to meet its responsibilities under FOIA. Confidential business information must be clearly marked "Business Confidential" at the top of the letter or page and each succeeding page and must be accompanied by a non-confidential summary of the confidential information. The non-confidential summary and remaining documents may be made available to the public under FOIA [43 CFR 2.13(c)(4), 43 CFR 2.15(d)(1)(i)].

APPLICATION PROCESSING FEE

There is no fee associated with this form.