

VESSEL AND TRIP INFORMATION LOG
NMFS FISHERIES OBSERVER PROGRAM
OBTRP OBTRG OBTRS 05/01/16

IN-OFFICE	DATE RECEIVED	
	EDITED BY	
	DEPLOYMENT ID	

OBS/TRIP ID <input type="text"/>	PROGRAM CODE <input type="text"/>	SECTOR ID <input type="text"/>	FLEET <input type="text"/>	VENDOR ID <input type="text"/>	INCIDENTAL TAKES <input type="checkbox"/> N <input type="checkbox"/> B <input type="checkbox"/> M <input type="checkbox"/> T	AGE STRUCTURES <input type="checkbox"/> Env. <input type="checkbox"/> Froz.	WHOLE FISH <input type="checkbox"/> N <input type="checkbox"/> Y	FIELD DIARY <input type="checkbox"/> N <input type="checkbox"/> Y	COMMENT LOG <input type="checkbox"/> N <input type="checkbox"/> Y
VESSEL NAME # 1	VESSEL NUMBER # 1	VESSEL PERMIT # 1	PORT SAILED (CITY, STATE) CODE	DATE SAILED	mm/dd/yy	TIME SAILED 24 h	:		
VESSEL NAME # 2	VESSEL NUMBER # 2	VESSEL PERMIT # 2	PORT LANDED (CITY, STATE) CODE	DATE LANDED	mm/dd/yy	TIME LANDED 24 h	:		
HOME PORT (CITY, STATE) CODE	EXP. TRIP DUR day(s)	CREW SIZE (INCLUDE CAPT)	DEALER'S NAME	VTR SERIAL NUMBER	STEAM TIME (calc)				
					hrs				

TRIP TYPE	TRIP COSTS									
Single Gear 1 _____	ICE USED	FUEL USED	DAMAGE/LOSS * Unknown _____	SUPPLIES * Unknown _____	FOOD Unknown _____	ICE (PER TON) Unknown _____	FUEL (PER GAL) Unknown _____	WATER Unknown _____	OIL Unknown _____	BAIT Unknown _____
Multiple Gear 2 _____	_____ . ____ tn	_____ gal	\$ _____ . 00	\$ _____ . 00	\$ _____ . 00	\$ _____ . ____	\$ _____ . ____	\$ _____ . 00	\$ _____ . 00	\$ _____ . 00

GEAR INFORMATION (IN USE & STOWED)								TIME LOST *	
PRIMARY GEAR	CODE	USED?	# ONBRD	# SOAK	CAPT EXP (yrs)	TARGET SPECIES	CODE(S)	REASON	AMOUNT
	<input type="text"/>	No 0 _____ Yes 1 _____							_____ . ____ hrs
OTHER GEAR 1	CODE	No 0 _____ Yes 1 _____							_____ . ____ hrs
OTHER GEAR 2	CODE	No 0 _____ Yes 1 _____							_____ . ____ hrs
OTHER GEAR 3	CODE	No 0 _____ Yes 1 _____							_____ . ____ hrs

# TRIP HAULS	# UNOBSERVED HAULS	PRIMARY SPECIES LANDED	PHOTOS? <input type="checkbox"/> N <input type="checkbox"/> Y	SCALLOP TRIPS ONLY		
				SOAKED? No 0 _____ Yes 1 _____	# OF BAGS	AVERAGE WGT/BAG _____ lb

DATE ARRIVED AT DOCK	mm/dd/yy	TIME ARRIVED	24 h
_____ / _____ / _____	_____ / _____ / _____	_____ :	
DATE DISEMBARKED	mm/dd/yy	TIME DISEMBARKEE	24 h
_____ / _____ / _____	_____ / _____ / _____	_____ :	

* Fields that require a comment