# **DETERRING MARINE MAMMALS: MORTALITY/INJURY REPORTING FORM**

National Marine Fisheries Service, 1315 East-West Highway, Silver Spring, MD 20910

PLEASE PRINT NEATLY AND IN CAPITAL LETTERS
1. LAST NAME 2. FIRST NAME 3. MI
4.MAILING ADDRESS
6. CITY 7. PRONE NOWBER
6. CITY  7. PHONE NOWBER  1. PHONE NOWBER
8. STATE 9. ZIP 10. VESSEL NAME
11. VESSEL REGISTRATION. NO.  12. SALTWATER ANGLER REGISTRATION NO.
13. FISHING GEAR TYPE/TARGET SPECIES OR PROPERTY DESCRIPTION
14. DATE OF MORTALITY/INJURY (MM DD YYYY)  15. APPROXIMATE TIME OF MORTALITY/INJURY  AM/PM  AM/PM
16. LOCATION OF MORTALITY/INJURY 17. VISUAL SCAN CONDUCTED
LATITUDE 0 LONGITUDE 0 YES NO
19. TYPE OF DETERRENT USED  20. MARINE MAMMAL SPECIES TARGETED  21. ENTER SPECIES CODE, TYPE OF MORTALITY/INJURY (SEE LIST OF CODES ON PREVIOUS PAGE), AND THE NUMBER OF EACH
SPECIES INVOLVED. MAKE ONE ENTRY FOR EACH SPECIES INVOLVED IN THIS INCIDENT. YOU MAY INCLUDE UP TO THREE
MORTALITY/INJURY CODES PER SPECIES.  SPECIES MORTALITY/INJURY CODE NUMBER
DESCRIPTION OF UNKNOWN SPECIES. CIRCUMSTANCES OF MORTALITY/INJURY INCIDENT, DETERRENT USE Please provide a detailed description of the animal involved, including color patterns, length, and body shape and size (drawings are helpful), are photos if possible. State whether the animal involved was a whale, dolphin, porpoise, seal, sea lion. If a deterrent was used, please provide any other relevant information, such as specifications of the device, how it was deployed, the behavior of the animal in response to the deterrent, and he occurrence/behavior of other protected species in the area. You may also use this space for other comments regarding this incident.

NOAA/NMFS
OFFICE OF PROTECTED RESOURCES F/PR2
1315 EAST WEST HIGHWAY
SILVER SPRING MD 20910-9721



NO POSTAGE
NECESSARY IF
MAILED
IN THE UNITED
STATES

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NATIONAL OCEANIC & ATMOSPHERIC ADMINISTRATION NATIONAL MARINE FISHERIES SERVICE OFFICE OF PROTECTED RESOURCES F/ PR2 1315 EAST WEST HIGHWAY SILVER SPRING MD 20910-9721

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# IMPORTANT! MARINE MAMMAL REPORTING FORM

# DETERRENT USE MARINE MAMMAL MORTALITY/INJURY REPORTING FORM

National Marine Fisheries Service, 1315 East-West Highway, Silver Spring, MD 20910

### INSTRUCTIONS FOR COMPLETING THE MORTALITY/INJURY REPORTING FORM

This reporting form is required ONLY WHEN there is an incidental mortality or injury (M/I) to a marine mammal during use of a deterrent device. You are required to report the incidental mortality or injury within 48 hours after the end of the fishing trip or within 48 hours of an occurrence of mortality or injury.

### PLEASE PRINT NEATLY AND IN CAPITAL LETTERS.

The reporting form should be detached from this instruction sheet, folded, and sealed prior to mailing. No postage is necessary for mailing. Forms may also be filled out online, emailed to nmfs.mireport@noaa.gov, or faxed to NMFS at 301-713-0376. Questions regarding completion of this form, and requests for additional forms, may be directed to the NMFS Office of Protected Resources, 1315 East-West Hwy., Silver Spring, MD 20910-3226, 301-427-8402.

### MORTALITY/INJURY REPORT FIELD DEFINITIONS

**VESSEL NAME:** Enter the name of the vessel as it is identified for recreational fishing operations.

**VESSEL REGISTRATION NUMBER:** Enter the vessel's Federal, state, or tribal registration numbers of the registered vessel OR **SALTWATER ANGLER REGISTRATION NUMBER:** Enter the saltwater angler registration number if deterrence occurred during fishing.

**FISHING GEAR TYPE AND TARGET SPECIES OR PROPERTY DESCRIPTION:** If deterrence occurred during recreational fishing, enter the type of fishing gear used and the target species being fished when this deterrence occurred. If marine mammal was deterred from private or public property, enter a description of the property.

**DATE OF MORTALITY/INJURY:** Enter the date the mortality/injury occurred. For example: November 1, 2018 is entered as 11/01/2018.

**TIME OF MORTALITY/INJURY:** Enter the approximate time of day the mortality/injury occurred. Indicate AM if the mortality/injury occurred between midnight & noon, or PM if the mortality/injury occurred between noon and midnight.

**LOCATION OF MORTALITY/INJURY LATITUDE & LONGITUDE:** Use standard entries in degrees and minutes.

**VISUAL SCAN CONDUCTED**: If seal bombs, underwater cracker shells, banging objects, pulsed power devices, or low frequency broadband devices were used check yes if a visual scan for certain marine mammals within 100-m was conducted before use, check no if a visual scan was not conducted before use.

**NUMBER OF ATTEMPTS:** Enter the number of times a deterrent was deployed.

**TYPE OF DETERRENT USED:** Describe the deterrent used when the mortality/injury occurred. Categories of deterrents include visual; physical barriers; tactile – projectiles, manual, electric, water; acoustic; explosive. Enter the category as well as the specific deterrent.

**MARINE MAMMAL SPECIES TARGETED:** Enter the species code for the marine mammal that was targeted to deter. **SPECIES INCIDENTALLY KILLED OR INJURED:** Enter the species code and the mortality/injury code of the animal(s) Involved. Refer to the species and mortality/injury code lists included on page 2 of these instructions. Enter the number of animals involved in each mortality/injury. You may enter up to three (3) injury codes per species. Make as many entries as apply to the date, time, and location entered in items 14-16.

**DESCRIPTION OF UNKNOWN SPECIES, CIRCUMSTANCES OF M/I INCIDENT, DETERRENT USE:** If you have entered a species code for an unidentified species, please provide a detailed description of the animal involved, including color patterns, length, any identifying marks (flipper tags, brands, etc.), body shape (drawings are helpful), and photos if possible. Photos can be emailed to <a href="mailto:nmfs.mireport@noaa.gov">nmfs.mireport@noaa.gov</a>. State whether the animal involved was a cetacean (whale, dolphin, or porpoise) or a pinniped (seal or sea lion). Please provide any other relevant information such as specifications of the device, how the deterrent was deployed, the approximate distance between the deterrent and the animal, the behavior of the animal(s) that prompted the deterrence, the behavior of the animal(s) in response to the deterrent, and occurrence/behavior of other protected species in the area. You may also use this space for other comments regarding this incident.

# DETERRENT USE MARINE MAMMAL MORTALITY/INJURY REPORTING FORM

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### SPECIES AND STOCK CODES FOR MARINE MAMMALS

Seals and sea lions	Dolphins and porpoises	Toothed and baleen whales
<ul> <li>100- Steller (northern) sea lion</li> <li>101- California sea lion</li> <li>105- Northern (Pribilof) fur seal</li> <li>115- Harbor seal</li> <li>116- Spotted seal</li> <li>117- Ringed seal</li> <li>121- Ribbon seal</li> <li>124- Gray seal</li> <li>127- Harbirg month seal</li> </ul>	047- Atlantic white-sided dolphin 049- Pacific white-sided dolphin 053- Common dolphin 054- Bottlenose dolphin 055- Grampus (Risso's) dolphin 058- Spotted dolphin 060- Spinner dolphin 061- Striped dolphin	002- North Atlantic right whale 005- Gray whale 007- Fin whale 010- Minke whale 011- Humpback whale 012- Sperm whale 016- Beluga whale 038- False killer whale
<ul> <li>127- Hawaiian monk seal</li> <li>129- Northern elephant seal</li> <li>130- Bearded seal</li> <li>131- Harp seal</li> <li>132- Hooded seal</li> <li>203- Unidentified sea lion</li> <li>204- Unidentified seal</li> </ul>	<ul> <li>Northern right whale dolphin</li> <li>Harbor porpoise</li> <li>Dall's porpoise</li> <li>Rough-toothed dolphin</li> <li>Unidentified small cetacean (porpoise or dolphin)</li> </ul>	<ul> <li>039- Killer whale</li> <li>221- Pilot whale</li> <li>230- Beaked whale</li> <li>231- Bryde's whale</li> <li>232- Dwarf sperm whale</li> <li>210- Unidentified baleen whale</li> <li>220- Unidentified toothed whale</li> </ul>

### MORTALITY/INJURY CODES FOR MARINE MAMMALS

01- Visible blood flow 08- Listlessness or inability to defend

02- Loss of/damage to appendage/jaw 09- Inability to swim or dive 3- Inability to use appendage(s) 10- Equilibrium imbalance

Inability to use appendage(s)
 Asymmetry in shape of body or body position
 Ingestion of gear or deterrent

05- Any noticeable swelling or hemorrhage (bruising) 12- Released trailing gear/gear perforating body

G- Laceration (deep cut) 13- Other wound or injury

Rupture or puncture of eyeball 14- Killed

or reapture of puncture of cycoun

### **COLLECTION MANDATE**

This collection of information is mandated by the Marine Mammal Protection Act of 1972, as amended (16 U.S.C. 1361 *et. seq.*), and by implementing regulations contained at 50 CFR 216.116. The information supplied on this form will be used by the National Marine Fisheries Service to estimate levels of incidental mortalities and injuries related to use of deterrents.

Public reporting burden for this collection of information is estimated to average 0.25 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Director, Office of Protected Resources, National Marine Fisheries Service, 1315 East-West Hwy., Silver Spring, MD 20910-3226.

The National Marine Fisheries Service may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a current and valid OMB control number. The OMB control number for this form is 0648-0292, which expires on 12/31/2022.