

20XX Economic Survey of Federal South Atlantic Golden Crab Permit Holders

Permit owner name:

Survey #:

Vessel name:

Vessel ID:

Please complete this survey. Enter "0" if you did not have any expenses in a category.
Do not leave blank!

2019 Average Trip Expenses:

- On this page we would like you to enter the **financial expenses** (actual dollar payments) you incurred during a normal or average trip in 2019 for the operation of the vessel listed above.

Pay:

1. Was the owner also the captain of this vessel? Yes No
2. If owner was the captain, was the owner paid a captain's share? Yes No N/A
If Yes, amount of captain's share:

3. AVERAGE AMOUNT paid to hired crew of _____ PER TRIP FOR this vessel: \$

(Not to Owner! For example: from IRS Form(s) 1099-MISC or equivalent)

Average Trip Expenses:

4. AVERAGE AMOUNT paid PER TRIP for fuel used by this vessel in 2019: \$ _____
About how many gallons of fuel is that? _____
5. AVERAGE AMOUNT paid PER TRIP for bait used by this vessel in 2019: \$ _____
6. AVERAGE AMOUNT paid PER TRIP for ice used by this vessel in 2019: \$ _____

7. AVERAGE AMOUNT paid PER TRIP for groceries used by this vessel in 2019:

\$ _____

6. AVERAGE other expenses paid PER TRIP in 2019: \$ _____

2019 Total Annual Boat Expenses:

- On this page we would like you to enter the total **financial expenses** (actual dollar payments) you incurred during 2019.
- For each question enter the **sum of all 2019 expenses**.

8. TOTAL AMOUNT paid for any vessel maintenance, repair, new purchase or upgrade (including engine, fixed gear, electronics, etc.): \$ _____

9. TOTAL AMOUNT paid for vessel insurance in 2019 (premium): \$ _____

10. TOTAL OVERHEAD applicable to this vessel: dockage, licenses, (share of) rent, utilities, professional services, truck expenses, etc. \$ _____
Please Exclude: loan payments, insurance payments, depreciation, and income taxes.

11. Did you have any loan(s) on your vessel at any time during 2019: Yes No

If Yes: a) Total amount you still owe at **end of** 2019: \$ _____

b) Please split total loan **payments** in 2019 (Question 6) into:

i) Interest paid in 2019: \$ _____

ii) Principal repaid in 2019: \$ _____

12. Please estimate the CURRENT MARKET VALUE OF THE FISHING VESSEL you use to harvest golden crab: engines, FIXED fishing gear and electronics (this is the amount that you probably would get if you decided to sell your boat and equipment: your best guess is fine)

\$ _____

2019 Gear Expenses and Ownership:

- On this page we would like you to enter information on gear **purchases and ownership** during 2019.

Crab Trap Expenses:

13. Number of traps owned at year's end: _____ traps

14. Number of traps lost: _____ traps

15. Number of traps purchased: _____ traps

16. Cost per trap: \$_____ per trap

17. Average life span of a trap not lost or damaged: _____ months

15. Do you have a refrigerated seawater system on the boat? Yes / No

16. What year was it installed? _____

17. Cost of installation \$ _____

18. How have you changed your fishing activities due to COVID-19?

I certify that the information contained on this form is accurate and complete to the best of my knowledge:

Signature of person completing report

Date

Printed name of person signing report

(_____)_____
Phone number

Please return this completed form in the enclosed prepaid envelope!

[Mail to: Scott Crosson, NOAA/SEFSC, 75 Virginia Beach Dr, Miami, FL 33149]

NOAA's National Marine Fisheries Service (NMFS) is collecting this economic information to improve its ability to conduct the analyses required by the Magnuson-Stevens Fishery Conservation and Management Act (MSA) and other applicable law. NMFS and the Regional Fishery Management Councils will use this information to monitor, explain and predict changes in the economic performance and impacts of commercial fisheries. Among other things, this will enable fisheries managers and the public to more fully consider the economic effects of proposed and existing regulations for federally managed fisheries.

A Federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with an information collection subject to the requirements of the Paperwork Reduction Act of 1995 unless the information collection has a currently valid OMB Control Number. The approved OMB Control Number for this information collection is 0648-0773 and its expiration date is XX/XX/20XX. Without this approval, we could not conduct this information collection. Public reporting for this information collection is estimated to be approximately 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the information collection. All responses to this information collection are voluntary. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to the Southeast Fisheries Science Center, 75 Virginia Beach Drive, Bldg. 1, Miami, FL 33149-1003 Attn: Dr. Scott Crosson, at 305-361-4468, scott.crosson@noaa.gov

We appreciate the confidential nature of the data being collected by this survey. NMFS will handle individual survey data as confidential business information and a form of protected personal information and will maintain the confidentiality of the information consistent with legal authorities available to it, including but not limited to the Privacy Act (5 U.S.C. Section 552a) and the Trade Secrets Act (18 U.S.C. Section 1905). NMFS will protect individual survey data from public disclosure to the extent permitted by law and it has instituted procedures to provide that protection.