

**VESSEL AND TRIP INFORMATION LOG
 NMFS FISHERIES OBSERVER PROGRAM
 OBTRP OBTRG OBTRS 01/01/21**

IN-OFFICE	DATE RECEIVED	
	EDITED BY	
	DEPLOYMENT ID	

OBS/TRIP ID <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	PROGRAM CODE <input type="text"/> <input type="text"/> <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)	

TRIP TYPE Single Gear 1 _____ Multiple Gear 2 _____	TRIP COSTS									
ICE USED	FUEL USED	DAMAGE/LOSS *	SUPPLIES *	FOOD	ICE (PER TON)	FUEL (PER GAL)	WATER	OIL	BAIT	
_____ tn	_____ gal	Unknown _____	Unknown _____	Unknown _____	Unknown _____	Unknown _____	Unknown _____	Unknown _____	Unknown _____	Unknown _____
		\$ _____ . 00	\$ _____ . 00	\$ _____ . 00	\$ _____ . 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"/> <input type="text"/> <input type="text"/>	No 0 _____ Yes 1 _____						_____	_____ . ____ hrs
OTHER GEAR 1	CODE	USED?	# ONBRD	# SOAK	CAPT EXP (yrs)	TARGET SPECIES	CODE(S)	_____	_____ . ____ hrs
OTHER GEAR 2	CODE	USED?	# ONBRD	# SOAK	CAPT EXP (yrs)	TARGET SPECIES	CODE(S)	_____	_____ . ____ hrs
OTHER GEAR 3	CODE	USED?	# ONBRD	# SOAK	CAPT EXP (yrs)	TARGET SPECIES	CODE(S)	_____	_____ . ____ 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

COMMENTS 	Only fill in for first trip of deployment	
	DATE ARRIVED AT DOCK	mm/dd/yy
	TIME ARRIVED	24 h
		_____ / _____ : _____
Only fill in for last trip of deployment		
DATE DISEMBARKED	mm/dd/yy	
TIME DISEMBARKED	24 h	
	_____ / _____ : _____	

* Fields that require a comment