

Trip Data Release Form

PAPERWORK REDUCTION ACT STATEMENT: The information provided on this form will be used to ensure that the data for a specific trip is not provided to a person who does not have authority to obtain that data under the confidentiality requirements of the Magnuson-Stevens Fishery Conservation and Management Act (MSA) and the Marine Mammal Protection Act (MMPA). Meeting those confidentiality requirements are critical for collecting information that is used in analyses that support the conservation and management of living marine resources and that are required under the MSA, the Endangered Species Act (ESA), the MMPA, the National Environmental Policy Act (NEPA), the Regulatory Flexibility Act (RFA), Executive Order 12866 (EO 12866), and other applicable laws. The public reporting burden for this form is estimated to average 2 minutes per response, including the time for completing, reviewing, and transmitting the information on the form. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden to: Amy Martins, National Marine Fisheries Service, Northeast Fisheries Science Center, Fisheries Sampling Branch, 166 Water Street, Woods Hole, MA 02543-2266. Providing the requested information is required to deliver the copy of the trip to the requested location and to release the trip data. The information on this form will be kept confidential as required under Section 402(b) of the MSA (18 U.S.C. 1881a(b)) and regulations at 50 C.F.R Part 600, Subpart E. Notwithstanding any other provision of the law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number. This is an approved information collection under OMB Control No. 0648-0593 through XX/XX/20XX.

Policy for Data Requests of NMFS Observer-Obtained Information

1. The only individuals who may request and receive data include: the owner(s), or the captain acting as an authorized representative for the owner(s), or a vessel participating in the National Marine Fisheries Service (NMFS) Northeast Fisheries Science Center (NEFSC) Observer Program. No other individuals may be issued any data under this policy.
2. Any data request must be submitted in writing on a form letter which may be obtained from a NMFS Observer, or the address below. Two signatures are required on this letter: that of the individual requesting the data, and that of the individual releasing the data. All letters must then be returned to the following address:

Chief, Fisheries Sampling Branch
National Marine Fisheries Service
Northeast Fisheries Science Center
166 Water Street
Woods Hole, MA 02543-1097

Any questions or other requests relating to data release should also be directed to the above address.

3. It should be understood that upon release of the requested data, the recipient then becomes responsible for it.
4. The individual signing the letter as the "releaser" must issue the information in compliance with this policy.
5. Data may not be released upon an oral request, or without first completing and signing the authorized release letter mentioned above.
6. Field diaries do not meet the specifications of releasable data under the policy. No field diaries may be copied for, or reviewed by, vessel owners or captains.
7. Release of data for trips in which more than one vessel participated (i.e., pair trawl trips) may only occur if both vessel owners or captains complete and sign data release letters.
8. Any requests for historical data (i.e., data that an observer has already mailed in) should be forwarded to the address above.
9. All letters should be completed in pen, not pencil.

**NMFS FISHERIES OBSERVER PROGRAM
TRIP DATA RELEASE FORM**

Request Date _____/_____/_____

Observer Trip ID # _____

Vessel Name _____

USCG Doc # _____

Date Landed _____/_____/_____

PRINT Name

Signature

PRINT Mailing Address:

Copies Released By: _____ Date _____ Edited? Yes ___ No ___

(For NMFS Office Use)

TEAR AT PERFORATION AND RETAIN BELOW SECTION FOR YOUR RECORDS

The data you receive may be preliminary and not yet completely reviewed.

Observer Trip ID # _____

Date Requested _____

Mail Request To:
Chief, Fisheries Sampling Branch
National Marine Fisheries Service
Northeast Fisheries Science Center
166 Water Street
Woods Hole, MA 02543-1097

Questions or Comments:
Gina Shield
508-495-2139