

**Highly Migratory Species Observer Notification Form**

**This form is provided for your response.** Please provide the information requested below and return by mail or e-mail (popobserver@noaa.gov) at least 5 days prior to your estimated departure. If the vessel is not fishing or is involved in another fishery during the selection period, please indicate this under Vessel Fishing Status.

Captain's Name: \_\_\_\_\_ Vessel Name: \_\_\_\_\_

Documentation/Vessel Number: \_\_\_\_\_ Overall Length: \_\_\_\_\_ (ft)

Crew Size: \_\_\_\_\_ (include skipper) Bunk Capacity: \_\_\_\_\_ Life Raft Capacity: \_\_\_\_\_

Contact Person/Telephone Number(s): \_\_\_\_\_

<b>Communication Equipment</b> (please check)	<b>Commercial Fishing Vessel Safety Examination Decal</b>
Cellular phone:	Serial Number:
VHF:	Date of expiration: ____/____ <b>Month/ Year</b>
Single Side Band:	
Call sign:	

**Vessel Fishing Status:**

**Port of Departure:**

Dock Facility: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Telephone Number: (        ) \_\_\_\_\_

Departure Date: \_\_\_\_\_ Departure Time: \_\_\_\_\_ (AM or PM)

Dock Facility: \_\_\_\_\_

**Expected Landing Port:**

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Telephone Number: (        ) \_\_\_\_\_

Anticipated Landing Date: \_\_\_\_\_

*I certify under penalty of perjury under the laws of the United States of America that the information given on this form is true and correct, and that I have full authority to execute this form.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

*For the Pelagic Observer Program, please return by mail to SEFSC Pelagic Observer Program, 75 Virginia Beach Dr. Miami, FL 33149 or e-mail (popobserver@noaa.gov). For questions call 800-858-0624.*

*For the Shark Observer Program, please return by mail to SEFSC Shark Bottom Longline Observer Program, 3500 Delwood Beach Rd, Panama City, FL 32408-7403 or fax to (850) 235-3559. For questions call (850) 234-6541.*

**Public Burden Statement - Effective 4/30/2020**

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 0648-0593. 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 mandatory. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to the NOAA/NMFS/SEFSC at: 75 Virginia Beach Drive, Miami, FL 33149, Attn: Fisheries Biologist Andy Davis, Andrew.Davis@noaa.gov