

Observer ID

OMB Control No. 0648-0593 exp. 12/31/2021

# AS

## DOC/NOAA Fisheries Pacific Islands Region Longline Observer Program

Trip No.

Declared Trip Type

Observer Manual Version ID

### Trip Specifications

Vessel Documentation No.

Vessel Name

Operator Name

First Name and Middle Initial

Last Name

### Trip Times and Port Stops

Trip Start

Day

Month

Year

Hour

Minute

Departure Date/Time

Departure Port

### Intermediate Port Stops

Stop No.

Stopped

Resumed

Stop Port

Day

Month

Year

Hour

Minute

Day

Month

Year

Hour

Minute

High-grading?

If checked document on back

Trip End

Day

Month

Year

Hour

Minute

Trip Issues?

(Debrief Use Only)

Y Yes  
N No

If Y document on back

Arrival Date/Time

Arrival Port

Comments

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# AS

**DOC/NOAA Fisheries  
Pacific Islands Region  
Longline Observer Program**

From front of  
this form

Trip No.

***Trip Specifications Comments***

Comments (cont. from the front of this form)


High-grading Comments


Trip Issues Comments (Debriefing Use Only)
