OMB Control No. 0648-0456 Expiration Date: 12/31/2024

## SHORT-TAILED ALBATROSS RECOVERY DATA FORM

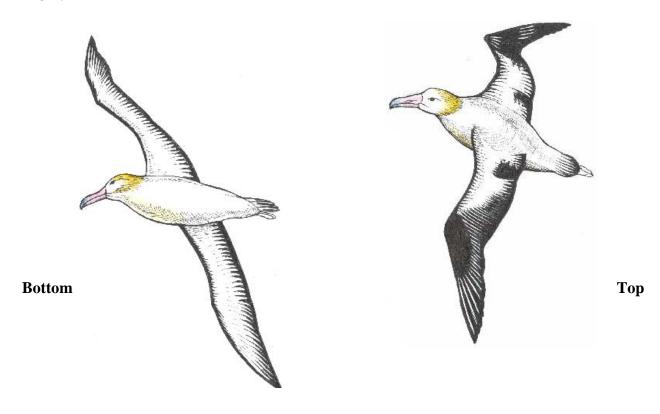
I. CAPTURE INFORMATION								
Date: Time:			GPS Lat.	S Location:	Long			
			Lat.	Lat.: Long.:				
Vessel Name:	Left Leg Ba	nd Color.	Righ	ht Leg Band Color:	Photograph (check one):			
Official Number:	Number:		Nun	ıber:	Yes O <sub>No</sub>			
Ојјиш гчитоег.	Text Color:		Text Color	<i>y</i> •	If a photo is taken, attach to form when submitted.			
Bird alive at capture? (check one) Yes No (If "No", do not fill out Sections II through V. Instead, please refer to the dead short-tailed albatross instructions on the "Short-tailed Albatross Handling Guidelines" placard.)								
Bird captured during (check one): Haul Soak Unknown			Нос	Hook Size (if known):				
II. ASSESS BIRD'S CONDITION								
Answer the following questions by marking an "x" in the Yes or No column. If all questions are answered "Yes," the bird may be released following the release guidelines on the "Short-tailed Albatross Handling Guidelines" placard. <i>Please indicate location of injury on bird diagram</i> (Page 3).								
Observation Checklist		Yes	No	(	Comments			
1. Can the bird stand and hold head upright?		0	0					
2. Is the bird alert, responsive, aware of surroundings?		0	0					
3. Are the eyes open?		0	0					
4. Does the bird breathe with its bill closed?		0	0					
5. Does the bird breathe quietly, without noises?		0	0					
6. Is the bird holding its wings in a normal position up and against the body, without drooping?		0	0					
7. Can the bird flap its wings?		0	0					
8. Is the bird free from visible damage? (If "No," note the wounds on bird diagram.)		0	0					
9. Is the bird free from hooks or entangled fishing line? If the hook has been swallowed, please note in comments. (If "No," note location of fishing gear on bird diagram)?		0	0					
10. Was the bird transported to a veterinarian for additional care? (If "Yes," note details of how the bird was transported and the time it was in transit).		0	0					

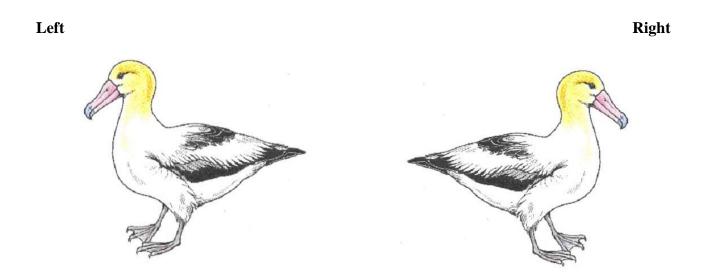
III. TREATMENT							
Name of veterinarian contacted:			Date:	Time:			
Date/Time:	Treatment Administered:						
IV. RECOVERY							
Observation Period (Check bird at 30 minutes, 1 hour, and every few hours. Use more sheets if necessary)							
Date/Time:	Bird Behavior/Condition:						
V. RELEASE (Note: Follow release criteria and guidelines in the "Handling and Release Guidelines for Short-tailed Albatross" placard.)							
Release Date:			Release Time:				
Release Location (Lat. / Long.):							
Bird Behavior After Release:							

## **Short-tailed Albatross Figures for Noting Wounds, Hooks, and Lines**

(Circle or draw where injury or fishing gear is located on bird. If the hook has been swallowed, please note this in Section II, Item 9)

Drawings by Ronald L. Walker





## **Privacy Act Statement**

Authority: The collection of this information is authorized under the Magnuson-Stevens Fishery Conservation and Management Act, 16 U.S.C 1801 et seq. and the Endangered Species Act, 16 U.S.C. 1531 et seq.

Purpose: Hawaii longline fishermen must safely handle and release short-tailed albatrosses (STAL - Phoebastria albatrus) caught incidentally during fishing operations, as required by a US Fish and Wildlife Service (FWS) Biological Opinion implemented in regulations at 50 CFR 665.815(b). If a bird is brought on board, fishermen are required to collect information, complete a STAL recovery data form, and follow instructions in the regulations for the handling of the bird. They must submit the form to FWS at the end of the trip.

Routine Uses: The Department will use this information for effective fishery management. Disclosure of this information is permitted under the Privacy Act of 1974 (5 U.S.C. Section 552a), to be shared within NMFS offices, in order to coordinate monitoring and management of sustainability of fisheries and protected resources, as well as with the applicable State or Regional Marine Fisheries Commissions and International Organizations.

Disclosure of this information is also subject to all of the published routine uses as identified in the COMMERCE/NOAA-6, Fishermen's Statistical Data.

Disclosure: Submission is mandatory for those persons falling under the requirements of 50 CFR 665.801(b) and 665.815(b). If the information is not provided, permit status may be affected.

## **Paperwork Reduction Act Information**

Public Reporting burden for this collection is estimated to average 75 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Regional Administrator, Pacific Islands Regional Office, NOAA Inouye Regional Center (IRC), NMFS/PIRO, 1845 Wasp Blvd., Building 176, Honolulu, HI 96818.

This information is being collected to provide the information needed to maximize the probability of long-term survival of an injured short-tailed albatross that is incidentally hooked or entangled by longline gear during fishing operations conducted by a Hawaii-based longline fishing vessel.

Responses to the collection are required by regulations implementing the Fishery Ecosystem Plan for Pacific Pelagic Fisheries of the Western Pacific Region (ref. 50 CFR 665.815). Data provided concerning the vessel operators are handled as confidential under the Magnuson-Stevens Fishery Conservation and Management Act (sec.402(b)). Notwithstanding any other provisions 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.