



National Marine Fisheries Service - Pacific Islands Region

WESTERN PACIFIC PRECIOUS CORAL SALES LOG

Name of Vessel _____

Permit Number _____

Logbook page # series -

Paperwork Reduction Act Information

Public reporting burden for this collection is estimated to as much as 7 minutes (log) to 5 minutes (sales report) 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 Region, NMFS, 1601 Kapiolani Blvd., Suite 1110, Honolulu, HI 96814.

This information is being collected to ensure accurate and timely records about the fishing activity of persons licensed to participate in fisheries under Federal regulations in the Western Pacific Region. This will enable the National Marine Fisheries Service and the Western Pacific Fishery Management Council to (a) determine how these persons would be affected by changes in management; (b) ensure that they are informed about prospective changes in fishery regulations and the analysis of estimated impacts; and (c) determine whether the objectives of the fishery program are being achieved by monitoring the fishery and evaluating the impacts on stocks and the fishery participants and related businesses. Responses to the collection are required to obtain the benefit of a license for the fishery involved (ref. 50 CFR 665.13). Data provided concerning the activities and business of the respondents are handled as confidential under the Magnuson-Stevens Fishery Conservation and Management Act (Sec. 402(b)). 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.

VESSEL REPORTING OBLIGATION REQUIREMENTS

The operator of any fishing vessel subject to the requirements of the Code of Federal Regulations, Title 50, Section 665.81 must maintain onboard the vessel an accurate and complete record of catch, effort, and other data on report forms provided by the Regional Administrator. All information specified on the forms must be recorded on the forms within 24 hours after the completion of each fishing day. Each form must be signed and dated by the fishing vessel operator. The original logbook form must be submitted to the National Marine Fisheries Service within 72 hours of each fishing operation. **Submit log report to: Pacific Islands Fisheries Science Center, ATTN: FMAP, 2570 Dole St., Room 119, Honolulu, HI 96822.**

INSTRUCTIONS FOR COMPLETING THE WESTERN PACIFIC PRECIOUS CORAL SALES REPORT

Seller Information

Collector/Company name: Individual name (black coral diver), company name of submersible/ROV.

VESSEL NAME: Name of support vessel.

PERMIT NUMBER: Western Pacific Precious Coral Permit number.

DATE OF LANDING: Date of vessel return to port.

PORT OF LANDING: Port of vessel return (e.g., Honolulu, Hilo, Kodiak, Los Angeles, etc.).

Buyer Information

NAME OF BUYER: Name of the first level buyer, i.e. initial buyer of the product from the permit holder. *Fill out separate Sales Form for each buyer.*

BUSINESS ADDRESS: Address of first level buyer.

TELEPHONE: Business or other contact telephone number of *first level buyer*

First level buyer: (1) the first person who purchases, with the intention to resell management unit species or portions thereof that were harvested by a vessel that holds a valid permit or is otherwise regulated under Subpart D of 50 CFR Part 665; or (2) a person who provides recordkeeping, purchase, or sales assistance in the first transaction involving management unit species (such as the services provided by a wholesale auction facility).

FAX: FAX number of the first level buyer.

E-MAIL: e-mail address of first level buyer.

SALES INFORMATION

Values should be input into the correct column matching the species and product form.

SPECIES NAME: If species is not listed then fill in the species in the “Other (specify)” box.

NUMBER OF CORAL TREES SOLD: Number of live coral colonies removed from the bottom.

WEIGHT SOLD (lb): List total weight sold in pounds.

REVENUE: Total value (\$) of the product.

DATE OF SALE: Date of product sale.

CAPTAIN/OPERATOR/AGENT: Print full name, sign on signature line, date of report completion.

VESSEL SALES REPORTING OBLIGATION REQUIREMENTS

The operator of any fishing vessel subject to the requirements of the Code of Federal Regulations, Title 50, Section 665.41 must submit to the National Marine Fisheries Service, within 72 hours of offloading of crustacean management unit species, an accurate and complete sales report on a form provided by the Regional Administrator. The form must be signed and dated by the fishing vessel operator. **Submit form to: Pacific Islands Fisheries Science Center, ATTN: FMAP, 2570 Dole St., Honolulu, HI 96822.**

Upon request any first level buyer must allow an authorized officer of the National Marine Fisheries Service or designee of the Regional Administrator to access, inspect, and copy all records relating to the harvest, sale, or transfer of any product taken by a vessel that has permits issued under 50 CFR 665.41.

NOAA National Marine Fisheries Service Ser. No. _____

Western Pacific Precious Coral Sales Log

Seller Information

Collector/Company name: _____
 Vessel name: _____ Permit Number: _____
 Date of Landing: _____ Port of Landing: _____

Buyer Information (Fill out a separate form for each buyer)

Name of Buyer: _____
 Business Address: _____

Telephone: (____) _____
 FAX: (____) _____
 E-mail: _____

Sales Information

Common Name	Species Name (subject to change)	Number of Coral Trees Sold	Weight Sold (pounds)	REVENUE (\$\$\$)	DATE OF SALE
Pink Coral	<i>Corallium secundum</i>				
	<i>Corallium regale</i>				
	<i>Corallium laauense</i>				
Gold Coral	<i>Gerardia sp.</i>				
	<i>Callogorgia gilberti</i>				
	<i>Narella sp.</i>				
	<i>Calyptraphora sp.</i>				
Bamboo Coral	<i>Lepidisis olapa</i>				
	<i>Acanella sp.</i>				
Black Coral	<i>Antipathes sp.</i>				
	<i>A. dichtoma</i>				
	<i>A. grandis</i>				
Other (specify)					

Captain/Operator/Agent

Print name: _____

Signature: _____ **Date:** _____

Submit form to: Pacific Islands Fisheries Science Center, ATTN: FMAP, 2570 Dole St., Honolulu, HI 96822