

Commission for the **Conservation of** Southern Bluefin Tuna

Catch Tagging Form Document Numbers

## CATCH MONITORING FORM Catch Documentation Scheme



Document Number

•		TCH / HARVEST SECTION - Tick and complete only one part								Flag	Flag State /Fishing Entity				
Ul Or	FOL	Wild Fishery         Name of Catching Vessel							Registration Number			Flag State/Fishing Entity			
	For F	armed SBT	SBT         CCSBT Farm Serial Number         Name of Farm												
L															
		Document Number(s) of associated Farm Stocking					king (FS) Form(s)								
ſ	Description of Fish														
	Produ	oduct: F (Fresh) / Type: Month			Month of Catch/	-	Gear CCSBT Stat		Net Weigh	: (kg)	Total	Number of whol	e Fish		
	FR (F	rozen)	RD/GGO/GGT/DRO/DRT/FL/OT*		Harvest (mm/yy)	Co					(inclu	uding RD/GGO/(	GGT/DRO/DRT)		
						_									
	* Гог	Other (OT): I	Describe the Type of Drody	. ct			* Г	or Other (OT)	Cracify Con	version Fast					
[		or Other (OT): Describe the Type of Product me of Processing Establishment (if applicable) A			Addross of Pro	* For Other (OT): Specify Conversion Factor  Address of Processing Establishment (if applicable)									
	Indilli	Address of Processing Establishment (if applicable) Address of Pro													
[	Valid	/alidation by Authority (not required for exports transhipped at sea): I validate that the above information is complete, true and cor-													
			ny knowledge and belief.									, cit	AL		
Nam		e and Title				Signature					OFFICIAL				
	1817						Date			بالمنابع					
•			TE PRODUCT DESTIN Certification by Master of												
	-	Name			<b>y</b>	Date			Signa			,	<u> </u>		
	L L	Name of Rec	reiving Vessel					Reg	istration Nur	nber	Flag	State/Fishing Er	ntitv		
∎ And	- F	Name of Receiving Vessel     Registration Number     Flag State/Fishing Entity													
Or		Certification	by Master of Receiving V	Receiving Vessel: I certify that the above i			ition is con	nplete, true ar	nd correct to	the best of r	my knowled	ge and belief.			
		Name				Date			Sign	ature					
	Signature of Observer (only for transhipment at sea):														
¥		Name				Date			Sign	ature					
	Ехро		Point of Export									Destination			
		City State or Provin							/Fishing Entity				(State/Fishing Entity)		
	* For transhipments on the high seas, enter the CCSBT Statistical Area instead of State/Fishing Entity and leave other fields blank. Certification <b>by Exporter:</b> I certify that the above information is complete, true and correct to the best of my knowledge and belief.														
	ŀ	Name			Licence No. / Company Name			I	Date Signature						
		Validation <b>b</b>	y Authority: I validate that	olete, ti	rue and co	rrect to the b	the best of my knowledge and belie			ć	A				
		Name and Title				Signature						official			
							Date				~ ~~				
•	FINAL PRODUCT DESTINATION SECTION - tick and complete only one destination Landing of Domestic Product for Certification of Domestic Sale: I certify that the above information is complete, true and correct to the best of my knowledge and belief.														
		estic sale.	Sile Floudet for Certif	Ceruncation of Domestic Sale. Ecertity that the above information is complete, true and correct to the best of my knowledge and											
T		Name	Addre	Address			9	Signature		Type: RD/GGO/GGT/DRO/DRT/FL/OT Weight		Weight (kg)			
Or I								-							
\															
	Impo						Final Point of Import								
		City State or Pr					itate/Fishing Entity								
		Certification <b>by Importer:</b> I certify that the above Name Address			information is comp	olete, tr					dge and belief. e: RD/GGO/GGT/DRO/DRT/FL/OT Weight (Kg)		Weight (Kg)		
						Date	Date Signat						weight (kg)		