

SPC MULTIPLE TAG RECOVERY FORM

MULTIPLE TAGGED FISH FOUND THE SAME DAY, COMING FROM THE SAME SET or THE SAME WELL

REVISED SPC - Feb 2017

DATE WHEN TAG FOUND:	YY	MM	DD
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"When the tag is removed from the fish, be sure none of it remains inside the fish"

WHERE FOUND: Fishing vessel Reefer / Transfer / Carrier Port Fish market Cold storage

ACTIVITY WHEN FOUND: Fishing Well transfer Transhipment Unloading at port **WELL NUMBER WHERE FISH FOUND:** _____ (If Applicable)

TAG NUMBER:	SPECIES: <input type="checkbox"/> SKJ <input type="checkbox"/> BET <input type="checkbox"/> YFT <input type="checkbox"/> Other <i>Please specify:</i>	FISH IDENTIFICATION: <input type="checkbox"/> Confirmed <input type="checkbox"/> Guessed
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FORK LENGTH cm:	NO length information <input type="checkbox"/>	HOW MEASURED: <input type="checkbox"/> Measuring tool <input type="checkbox"/> Estimated	STATE WHEN MEASURED: <input type="checkbox"/> Fresh <input type="checkbox"/> Frozen	MEASURED BY: <input type="checkbox"/> Observer <input type="checkbox"/> Other
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FISH CATCH INFORMATION / Date and position when fish was caught by the fishing vessel

DATE	Exact <input type="checkbox"/>	YY	MM	DD	Estimated <input type="checkbox"/>	From	YY	MM	DD	to	YY	MM	DD
POSITION	Exact <input type="checkbox"/>	dd	mm.mmm	N / S	Estimated <input type="checkbox"/>	Record 2 lines of latitude and 2 of longitude to form area of catch (box) in which tag was likely recovered							
	Latitude	°	'		dd	mm.mmm	N / S	ddd	mm.mmm	E / W			
	Longitude	°	'		ddd	mm.mmm	E / W	Latitude	Min	Max	°	'	
or DESCRIBE FISHING AREA (If NO Latitude and longitude provided above):													

FISHERY INFORMATION (Catcher / Fishing vessel that caught the tagged fish)

VESSEL NAME:	FLAG:
FISHING METHOD: <input type="checkbox"/> Longline <input type="checkbox"/> Purse seine <input type="checkbox"/> Troll <input type="checkbox"/> Handline <input type="checkbox"/> Gill net Other: _____	
SCHOOL TYPE: <input type="checkbox"/> Log <input type="checkbox"/> Free school <input type="checkbox"/> Anchored FAD <input type="checkbox"/> Drifting FAD FAD no: _____	

TRANSHIPMENT INFORMATION/ Carrier only (fill this section only if tags found during set share / transhipment /unloading)

NAME OF CARRIER:	FLAG:	DATE OF TRANSHIPMENT FROM FISHING VESSEL TO CARRIER:	YY	MM	DD	to	YY	MM	DD
LOCATION OF TRANSHIPMENT FROM FISHING VESSEL TO CARRIER (EEZ/Port):	TRANSHIPMENT POSITION:	Latitude	dd	mm.mmm	N / S	Longitude	ddd	mm.mmm	E / W

FINDER INFORMATION / finder details for lottery

FINDER NAME:	FINDER ADDRESS:
COUNTRY OF RECOVERY:	RECOVERY INFORMATION RECEIVED AT (Fishing Company/Agency name):
ALL TAGS PROVIDED WITH THIS FORM <input type="checkbox"/> Yes <input type="checkbox"/> No (tags kept by finder for reward purpose)	IF NO, specify expected reward location for finder (Port/Country):
TYPE OF REWARD <input type="checkbox"/> Not given <input type="checkbox"/> T-shirt <input type="checkbox"/> Cap <input type="checkbox"/> Cash - amount: _____	FORM COMPLETED BY:

Attach the tags here

ARCHIVAL TAG NUMBER (If applicable):

Type of tag	Reward
Yellow tag, Orange tag or Green tag	- 10\$ or Cap or T-shirt
Internal archival tag	- 250\$