

DISSOSTICHUS CATCH DOCUMENT

V 1.3

Document Number					Flag State Confirmation Number			
PRODUCTION SECTION								
1. Issuing Authority of Document Name		Address			Tel: Fax:			
2. Fishing Vessel Name		Home Port & Registration Number			Call Sign		IMO/Lloyd's Number (if issued)	
3. Licence Number (if issued)				Fishing dates for catch under this document 4. From: 5. To:				
6. Description of Fish (Landed/Transhipped)					7. Description of Fish Sold			
Species	Type	Estimated Weight to be Landed (kg)	Area Caught	Verified Weight Landed (kg)	Net Weight Sold (kg)	Recipient name, address, telephone, fax and signature.		
						Recipient Name:		
						Signature:		
						Address:		
						Tel:		
						Fax:		
Species: TOP <i>Dissostichus eleginoides</i> , TOA <i>Dissostichus mawsoni</i> Type: WHO Whole; HAG Headed and gutted; HAT Headed and tailed; FLT Fillet; HGT Headed, gutted, tailed; OTH Other (specify)								
8. Landing/Transshipment Information: I certify that the above information is complete, true and correct to the best of my knowledge. If any <i>Dissostichus</i> spp. was taken in the Convention Area, I certify that it was caught in a manner:								
<input type="checkbox"/> * consistent with CCAMLR conservation measures				<input type="checkbox"/> * not consistent with CCAMLR conservation measures				
Master of Fishing Vessel or Authorised Representative (print in block letters)		Signature and Date		Landing/Transshipment Port and Country/Area		Date of Landing/Transshipment		
9. Certificate of Transshipments: I certify that the above information is complete, true and correct to the best of my knowledge.								
Master of Receiving Vessel		Signature		Vessel Name		Call Sign		
						IMO/Lloyds Number (if issued)		
Transshipment within a Port Area: countersignature by Port Authority if appropriate.								
Name		Authority		Signature		Seal (Stamp)		
10. Certificate of Landing: I certify that the above information is complete, true and correct to the best of my knowledge.								
Name		Authority		Signature		Address		
						Tel.		
						Port of Landing		
						Date of Landing		
						Seal (Stamp)		
11. EXPORT SECTION					12. Exporter Declaration: I certify that the above information is complete, true and correct to the best of my knowledge.			
Description of Fish								
Species	Product Type	Net Weight	Name		Address		Signature	
							Export Licence (if issued)	
			13. Export Government Authority Validation: I certify that the above information is complete, true and correct to the best of my knowledge.					
			Name/Title		Signature		Date	
							Seal (Stamp)	
			Country of export				Export reference number	
14. IMPORT SECTION								
Name of Importer			Address					
Point of Unlading:			City		State/Province		Country	