

TRANSHIPMENT DECLARATION

Carrier vessel	Fishing vessel
Name of vessel and radio call sign	Name of the vessel and radio call sign
Flag	Flag
Flag State authorization number	Flag State authorization number
National Register Number	National Register Number
RFMO Register Number, if available	RFMIO Register Number, if available
	External identification

Day	Month	Hour	Year	2_0_	Agent's name:	Master's name of LSTLV:	Master's name of Carrier:
Departure			from				
Return			to		Signature:	Signature:	Signature:
Transshipment							

Indicate the weight in kilograms or the unit used (e.g. box, basket) and the landed weight in kilograms of this unit: kilograms LOCATION OF TRANSHIPMENT.....

Species	Port	Sea	Type of Product	Type of Product	Type of Product	Type of Product	Type of Product	Type of Product	Type of Product	Type of Product	Type of Product	Type of Product	Type of Product
			Whole	Gutted	Head off	Filletted							

If transshipment effected at sea, RFMO Observer signature: