ICCAT Transshipment Declaration

Carrier vessel	**Fishing vessel**
Vessel Name and radio call sign:	Vessel Name and radio call sign:
Flag Country/Entity/Fishing Entity:	Flag CPC:
Flag State authorization number:	Flag CPC authorization number:
Domestic Registration Number:	Domestic Registration Number:
ICCAT Record Number:	ICCAT Record Number, if applicable:
IMO Number, if any:	IMO Number, if any:
	External identification:

	Day	Month	Hour	Year	|2_|0_|__|__|	Agent's name:	F. V. Master's name:	Carrier vessel Master's name:
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 TRANSSHIPMENT……..

Species (by stock,* if applicable)[2]	Port		Area[3]		Type of Product[1] RD/GG/DR/FL/ST/OT	Net Weight (Kg)					

ICCAT Observer signature and date (if transshipment at sea):

[1] Type of Product should be indicated as Round (RD), Gilled and Gutted (GG), Dressed (DR), Fillet (FL), Steak (ST), Other (OT) (describe the type of product).
[2] A list of species by stock, with their geographic delineations, is included on the back of this form. Please provide as much detail as possible.
[3] Atlantic, Mediterranean, Pacific, Indian.

*If stock level information is not available, please provide explanation.