

## **Sea Scallop Access Area Compensation Trip Declaration Form**

You have declared into a Sea Scallop Access Area compensation trip. Enter the trip identification code(s) found on your compensation letter(s) of authorization.

Identification Code(s):

#1 \_ \_ \_ \_ \_                      #2 \_ \_ \_ \_ \_                      #3 \_ \_ \_ \_ \_

#4 \_ \_ \_ \_ \_                      #5 \_ \_ \_ \_ \_                      #6 \_ \_ \_ \_ \_

**SUBMIT**

**Paperwork Reduction Act Statement:** Public reporting burden for this collection of information is estimated to average 2 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other suggestions for reducing this burden to (name), NOAA Fisheries, (address).

All data submitted will be handled as confidential material in accordance with NOAA Administrative Order 216-100, Protection of Confidential Fishery Statistics. Notwithstanding any other provisions of the law, no person is required to respond to, nor shall any person be subjected to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.