

UNITED STATES DEPARTMENT OF COMMERCE  
NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION.  
NATIONAL MARINE FISHERIES SERVICE

**DEALER REPORTING FOR HIGHLY  
MIGRATORY SPECIES**

**Atlantic BAYS tunas (Bigeye, Albacore, Yellowfin and  
Skipjack), Atlantic sharks, and Atlantic swordfish**

YOU ARE ADVISED THAT DISCLOSURE OF THE INFORMATION REQUESTED IN THIS REPORT IS MANDATORY FOR THE PURPOSE OF MANAGING THE FISHERIES IN ACCORDANCE WITH THE FISHERY CONSERVATION AND MANAGEMENT ACT OF 1976 (16 U.S.C. 1801 ET. SEQ.). FAILURE TO REPORT OR FILING A FALSE REPORT MAY RESULT IN CIVIL OR CRIMINAL SANCTIONS. SEE, E.G., 16 U.S.C. 1857, 1858, 1859; 18 U.S.C. 1001.

# INSTRUCTIONS FOR COMPLETING THE HIGHLY MIGRATORY SPECIES DEALER FORM

Under Federal regulation, as specified in section 50 CFR 635.5, dealers issued a swordfish, shark or tuna permit by the National Marine Fisheries Service are required to report all purchases of these species (regardless of area caught; e.g., state or Federal waters) from U.S. flag vessels. The form must be submitted within 10 days of the end of each two-week reporting period to the Southeast Fisheries Science Center, 75 Virginia Beach Drive, Miami, Florida 33149. The reporting periods are the 1<sup>st</sup> through the 15<sup>th</sup>, and the 16<sup>th</sup> through the end of each month. If your business is located in the eastern coastal states Virginia north through Maine, do not report to the Southeast Science Center, but follow the reporting requirements established by the Northeast Regional Office.

This form is to be used to report the total quantity of highly migratory species during each two-week reporting period (regardless of area where species were caught; e.g., state or Federal waters). Only one form should be submitted for each period. Do not submit separately for individual trips or vessels.

If labels have been included with your dealer reports, you may attach **one** to the form in the upper left-hand area indicated by “*Affix label here*” for the reporting period specified (see below). If a different reporting period is desired, black out the dates on the label, and write in the correct reporting period in the boxes provided next to ‘Begin Date’ and ‘End Date’. **Please check the accuracy of the information on the label before using and contact the Permit Office if any errors are found.**

**DEALER REPORTING FOR HIGHLY MIGRATORY**

*Affix label here* (optional): Please Use Black or

Dealer Name: \_\_\_\_\_

SE Dealer #: D L R - State - Permit No. - Year (optional)

NE Dealer #: Permit No. (Enter both southeast and northeast federal permit numbers, if applicable to your facility.)

The following are the instructions that apply to the completion of the form. Remember to include vessel information on the back of the form if purchases of HMS species were made. Do not write in the space labeled **Schedule No. NMFS Use Only**, on the front or back of the form.

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|-------------|---|
| Dealer Name | Please use the labels if they have been provided and attach one to the form in the area indicated by “ <i>Affix label here</i> ” (see above). If the name of the business is incorrect or labels were not provided, print the name of the company as it appears on the permit application. Please avoid abbreviations or aliases. |
|-------------|---|
- |                      |  |
|----------------------|--|
| SE Dealer Permit No. | If a label has not been provided or the permit number on the label is incorrect (see above), print the permit number that has been issued by the NMFS, Southeast Regional Office in this space. Put one letter/number in each box. If the provided label has been affixed to the form, this portion of the form should be covered. Please check the accuracy of the label. If you do not have a SE Dealer No., leave this blank. |
|----------------------|--|
- |                      |  |
|----------------------|--|
| NE Dealer Permit No. | If a label has not been provided or the permit number is incorrect (see above), print the permit number issued by the NMFS, Northeast Regional Office in this space. Put one number in each box. If the label has been affixed to the form, this portion of the form should be covered. If you do not have a NE Dealer No., leave this blank. If your facility has both SE and NE Dealer Numbers, include both on this form. |
|----------------------|--|
- |                   |   |
|-------------------|---|
| Facility location | If your company has more than one facility, please print the county and state of the dealer facility for which you are reporting, in the spaces provided. |
|-------------------|---|
- |            |  |
|------------|--|
| Begin Date | <u>If the affixed label correctly reflects the reporting period, please leave this blank.</u> Otherwise, if labels have not been provided or the beginning dates of the period you are reporting are different, print the number for |
|------------|--|

the month, day, then year (all four digits) for the beginning of the reporting period covered by this report. Print one number in each box. If a label is affixed, but the reporting periods are different, **black out** the reporting dates provided on the label.

- End Date                      If the affixed label correctly reflects the reporting period, please leave this blank. If labels have not been provided or the ending dates of the period are different, then print the number for the month, day, then year (all four digits) for the end of the reporting period covered by this report. Print one number in each box. If a label is affixed, but the reporting periods are different, also **black out** the reporting dates provided on the label.
- Purchased Fish?              If **no** purchases of HMS (swordfish, sharks and tunas) were made during & Imported Fish?              the reporting period from US vessels, check or darken the ‘**No**’ circle beside the question, “Were any fish purchased for this period?.” If purchases were made from US vessels, mark ‘**Yes**’ and complete the rest of the form (front and back). Indicate if fish were imported for this period (with the question, “Were any fish imported for this period?”), but do not include these weights in your tallies.
- Phone No.                      Please include a phone number of the facility if one is not listed on your labels. This is useful information when the identity of the dealer cannot be determined, or incomplete information is provided.
- Contact (optional)              Please provide a contact who can answer any questions pertaining to your Dealer Report for Highly Migratory Species.

Record the dressed weights (no partial pounds, please) for all species that were purchased during the reporting period in the column labeled **Dressed Weight**.

Record the price per pound that was paid for purchases of HMS on the last day of the reporting period. This price should be entered in the column labeled **Price/Pound**.

**Vessel information** must be included on the **Back of the form** if purchases were made. For each vessel/boat from which highly migratory species were purchased during the reporting period, record the date that the fish were purchased (month, day and year), the name of the vessel, the vessel id. number (which is either the U.S. Coast Guard documentation or the state registration number), as well as the port and state (please use the 2 character abbreviation) where the vessel/boat landed.

**For dealers purchasing shark products**, vessel operators have requested the opportunity for dealers to indicate if shark products were landed with their fins on. Therefore, when vessels land with shark products, please indicate if all sharks landed had fins attached (Y), if not all fins were attached (N), or if the status was unknown (U) for that particular vessel. Otherwise (vessels without shark products), leave this blank. **For dealers not purchasing shark products**, a mark under the column “Fins Attached?” is not applicable.

The reports can be mailed in the pre-addressed, postage paid enveloped supplied by the Southeast Fisheries Science Center (the address is also listed on the bottom of the Dealer Reporting Form) or can be sent via FAX to (305) 361-4460. As another option, you can send the above information via e-mail to [Heather.Balchowsky@noaa.gov](mailto:Heather.Balchowsky@noaa.gov). Forms may also be downloaded from the SEFSC Forms website, filled out and submitted. The HMS Dealer form may be found at the bottom of the page at: <http://www.sefsc.noaa.gov/flsformsdownload.jsp>. If you have any questions concerning this form, or need additional forms or envelopes, contact Ms. Heather Balchowsky at (305) 361-4239 or at the above e-mail address. Otherwise, a “Fact Sheet for Dealers Purchasing Sharks, Swordfish, and BAYS Tunas” that answers additional questions may be found on the HMS website at: [http://www.nmfs.noaa.gov/sfa/hms/Linkpages/reporting\\_forms.htm](http://www.nmfs.noaa.gov/sfa/hms/Linkpages/reporting_forms.htm).

Thank you for your continued cooperation in the management of our Nation’s fisheries.

**DEALER REPORTING FOR HIGHLY MIGRATORY SPECIES**

OMB# 0648-0040 - Exp 10/31/2010  
Schedule No. NMFS Use Only:

Affix label here (optional):

Please Use Black or Blue Ink Only

Dealer Name: \_\_\_\_\_

SE Dealer #: (Shark and/or Swordfish permits) **D L R** - **State** - **Permit No.** - **Year** (optional)

NE Dealer #: (for Tuna permit) **Permit No.** (Enter both southeast and northeast federal permit numbers, if applicable to your facility.)

Begin Date: **M M** **D D** **Y Y Y Y**  
End Date: **M M** **D D** **Y Y Y Y**

Facility Location (County and State):

County											State		

Phone No: \_\_\_\_\_  
(if different than label)

Were any HMS fish purchased this period (from U.S. vessels) ?  Yes  No  
If "YES", provide vessel information requested on back of form.

Were any fish imported for this period ?  Yes  No  
(NOTE: Imports are not to be included on this form)

Contact: \_\_\_\_\_  
(optional)

Shark Species	NMFS CODE	Size Code	Dressed Weight	Price / Pound
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Large Pelagic Species	NMFS CODE	Size Code	Dressed Weight	Price / Pound
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LARGE COASTAL SHARKS				
Blacktip	3495	00		
Bull	3497	00		
Hammerhead	3516	00		
Lemon	3517	00		
Night	3494	00		
Nurse	3480	00		
Sandbar	3513	00		
Silky	3493	00		
Spinner	3496	00		
Tiger	3515	00		
Other/Unknown	3508	37		

SWORDFISH				
Swordfish > 300 lbs	4320	15		
Swordfish 200-299 lbs	4320	14		
Swordfish 100-199 lbs	4320	19		
Swordfish 50-99 lbs	4320	02		
Swordfish 26-49 lbs	4320	03		
Swordfish 0-25 lbs (rats)	4320	04		
Sword. chunks	4320	05		

PELAGIC SHARKS				
Blue	3504	00		
Mako-Shortfin	3505	00		
Oceanic Whitetip	3498	00		
Porbeagle	3501	00		
Thresher	3509	00		
Other/Unknown	3508	38		

MAJOR TUNAS				
Albacore Tuna	4651	10		
Bigeye	4657	08		
Bigeye chunks	4657	09		
Atlantic Bonito	0330	00		
Blackfin Tuna	4658	12		
Skipjack	4654	00		
Yellowfin 60+	4655	40		
Yellowfin 40-59 lbs	4655	41		
Yellowfin 20-39 lbs	4655	20		
Yellowfin chunks	4655	21		

SMALL COASTAL SHARKS				
Atlantic Sharpnose	3518	00		
Blacknose	3485	00		
Bonnethead	3483	00		
Finetooth	3481	00		
Other/Unknown	3508	39		

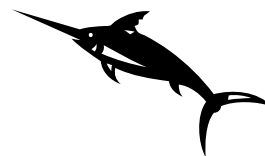
OTHER SPECIES				
Dolphin/Mahi	1050	00		
Great Amberjack	1812	00		
King Mackerel	1940	00		
Oilfish/Escolar	2502	00		
Wahoo	4710	00		

SHARK FINS	WET Only		DRY Only	
	lbs.	\$/lb.	lbs.	\$/lb.
Grade (A)	3475	27	32	
Grade (B)	3475	28	33	
Grade (C)	3475	29	34	
Grade (D)	3475	30	35	
Grade (E)	3475	31	36	

Date Received: \_\_\_\_\_  
*NMFS use only*



MAIL THIS FORM TO:  
**LOGBOOK PROGRAM, PO BOX 491740,**  
Miami, FL 33149



**In a Black or Blue Pen** (no pencils or red pens please), list the following for all vessels or persons that unloaded HMS products: Date Landed; Vessel Name; Documentation Number (preferred) or State Registration number; and the Port and State (using 2-letter postal abbreviation). For those vessels that landed with shark products, please indicate if all sharks landed had fins attached (**Y**), if not all fins were attached (**N**), or if the status was unknown (**U**). Otherwise (vessels without shark products), leave this blank.

Date Landed	Vessel Name	Documentation Number	Port Landed	State Landed	Fins attached?
/ / 20__					Y N U
/ / 20__					Y N U
/ / 20__					Y N U
/ / 20__					Y N U
/ / 20__					Y N U
/ / 20__					Y N U
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/ / 20__					Y N U

Public reporting burden for this information collection is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining data needed, and reviewing the completed collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Highly Migratory Species Division, National Marine Fisheries Service, F/SF1, 1315 East West Highway, Silver Spring, MD 20910.

Providing the requested information on the dealer form is mandatory and necessary for managing the Atlantic highly migratory species fisheries in accordance with the Atlantic Tunas Convention Act (16 U.S.C. 971 et seq.) and the Magnuson-Stevens Fishery Conservation and Management Act (16 U.S.C. 1801 et seq.). In accordance with NOAA Administrative Order 216-100, it is agency policy not to release confidential fisheries statistics, other than in aggregate form. Notwithstanding any other provision of the law, no person is required to respond to, nor shall any person be subject 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.