

# INSPECTION REPORT

Format as follows:

«NORTH EAST ATLANTIC FISHERIES COMMISSION REPORT OF INSPECTION»

|                                 |                                     |
|---------------------------------|-------------------------------------|
| Contracting party <u>NORWAY</u> |                                     |
| Assigned inspection vessel:     | Name : <u>KV SORTLAND</u>           |
|                                 | Registration number : .....         |
|                                 | Call sign : <u>LASE</u>             |
|                                 | NEAFC reference : <u>W342</u>       |
| Assigned inspectors:            | Name : <u>KAI R. SANDNES</u>        |
|                                 | NEAFC reference : <u>NOR - 0220</u> |
|                                 | Name : <u>MARCUS KONGSVIK</u>       |
|                                 | NEAFC reference : <u>NOR - 0284</u> |

## PART A. IDENTIFICATION OF INSPECTED VESSEL

|   |   |
|---|---|
| <p>A.1. International Radio Call Sign <u>YL 2888</u></p> <p>Vessel Name <u>SALDUS</u></p> <p>A.2. Contracting Party Internal Reference Number <u>LVR 0849</u></p> <p>A.3. Vessel Type <u>FISHING VESSEL</u></p> <p>A.4. Position of Inspection determined by the inspection vessel</p> <p>DATE <u>15.01.2016</u></p> <p>TIME <u>1340</u> UTC</p> <p>Latitude <u>75°13'N</u> Longitude <u>038°51'E</u></p> <p>A.5. Equipment used to determine the position <u>GPS</u></p> | <p>A.6. Flag state <u>LATVIA</u></p> <p>A.7. Master's Name and Address <u>SHADABEKOV PAKHBAR</u><br/><u>GREEN STIL 52</u><br/><u>KORSAKOV, RUSSIA</u></p> <p>A.8. Vessel Activity .....</p> <p>A.9. Position of Inspection determined by the inspected vessel</p> <p>DATE <u>15.01.2016</u></p> <p>TIME <u>1340</u> UTC</p> <p>Latitude <u>75°13'N</u> Longitude <u>038°51'E</u></p> <p>A.10. Equipment used to determine the position <u>GPS</u></p> |
|---|---|

Observations by the inspectors, if any: NO REMARKS

Initials: [Signature] [Signature]



## PART B. VERIFICATION <sup>1)</sup>

## B.1. VESSEL DOCUMENTATION

Checked: Y / N

|        |  |       |
|--------|--|-------|
| B.1.1. | Authorisation to fish in the NEAFC Regulatory Area:                  |       |
| B.1.2. | Authorisation to fish the following regulated resources: UNREGULATED |       |
| B.1.3. | Where appropriate,   | Y / N |
| B.1.4. | Where appropriate,   | Y / N |
| B.1.5. | Where appropriate,   | Y / N |

Observations by the inspectors, if any: NO REMARKS

Initials: [Signature]

## B.2. REPORTING OF VESSEL MOVEMENTS / VMS

Checked: Y / N

| B.2.1. Fishing trip |                        |                               | B.2.2. Hailing / VMS   |                     |
|---------------------|------------------------|-------------------------------|--|---------------------|
|                     | Arrival in<br>NEAFC RA | Last position<br>communicated | VMS transponder installed<br>VMS system operative            | Y / N<br>Y / N      |
| Date                | 11.01.2016             |                               | Are hail reports communicated                                | Y / N If Yes, note: |
| Time                | 22:40 UTC              |                               | <input checked="" type="checkbox"/> (a) Entry report         | date: 11.01.16      |
| Longitude           | 73°13'N - 040°09'E     |                               | <input type="checkbox"/> (b) Weekly report                   | date: —             |
| Latitude            | 040°09'E               |                               | <input type="checkbox"/> (c) Transshipment                   | date: —             |
| Days in NEAFC RA    |                        |                               | <input checked="" type="checkbox"/> (d) Last position report | date: 15.01.16      |

<sup>1)</sup> In the event that the result of the verification is positive indicate by encircling Y, and if negative mark N, otherwise indicate or note the requested information.



## B.3. RECORDING OF FISHING EFFORT AND CATCHES

### B.3.1. Fishing Logbook

Checked: Y / N

B.3.1.1. Are recordings made in accordance with Article 6: Y / N

B.3.1.1.1. If not, indicate the inaccurate or missing recording(s):

- ☐ (a) logbook not bound with numbered pages;
- ☐ (b) fishing gear used;
- ☐ (c) recording of catches by species and total;
- ☐ (d) fishing zones / location;
- ☐ (e) where appropriate, Y / N transshipment;
- ☐ (f) where appropriate, Y / N transmission of hail reports;
- ☐ (g) certification of recordings by the master
- ☐ (h) other: .....

### B.3.2. Production Logbook / Stowage Plan

Checked: Y / N

B.3.2.1. Are production logbook or stowage plan required: Y / N

B.3.2.2. Production logbook available: Y / N If No, go to 3.2.4.

B.3.2.3. If Yes, Information: COMPLETE/INCOMPLETE

B.3.2.3.1. If not, indicate the missing information:

- ☐ (a) quantities kept on board in product weight by type of commercial presentation and species;
- ☐ (b) conversion factors for each type of presentation;
- ☐ (c) certification of recordings by the master;
- ☐ (d) other: .....

B.3.2.4. A stowage plan maintained: Y / N

B.3.2.5. If Yes, Information: COMPLETE/INCOMPLETE

B.3.3.2.1. If not, indicate the missing information:

- ☐ (a) quantities not stowed by type of commercial presentation and species as indicated in the plan;
- ☐ (b) quantities by type of commercial presentation and species in the hold not identified.
- ☐ (c) other: .....



## B.4. CATCHES RETAINED ON BOARD

### B.4.1. Quantities recorded by the master

Checked: Y / N

| SPECIES | DECLARED QUANTITIES ON BOARD<br>(Kilograms Live weight) |                      |                            |                              | Where available<br>PROCESSED<br>QUANTITIES<br>(Kilograms Processed<br>weight) | CONVERSION<br>FACTOR |
|---------|---|----------------------|----------------------------|------------------------------|---|----------------------|
|         | On Board <sup>1)</sup>                                  | Caught <sup>2)</sup> | Transshipped <sup>3)</sup> | Total on Board <sup>4)</sup> |   |                      |
| CRQ     | 0   | 9415 kg              | 0                          | 9415 kg                      | —   | —                    |
|         |   |                      |                            |                              |   |                      |
|         |   |                      |                            |                              |   |                      |
|         |   |                      |                            |                              |   |                      |
|         |   |                      |                            |                              |   |                      |
|         |   |                      |                            |                              |   |                      |
|         |   |                      |                            |                              |   |                      |
|         |   |                      |                            |                              |   |                      |
|         |   |                      |                            |                              |   |                      |
| TOTAL   |   |                      |                            | 9415 kg                      |   |                      |

1. Quantities on board when entering the NEAFC RA.
2. Quantities caught and retained on board in the NEAFC RA.
3. Quantities loaded (+) or unloaded (-) in the NEAFC RA.
4. Total declared quantities on board at the time of inspection.

### B.4.2. Quantities on board determined by the inspectors

| SPECIES | QUANTITY<br>(Kilograms<br>Processed weight) | VOLUME/DENSITY<br>FACTOR/<br>CONVERSION FACTOR | CALCULATED<br>QUANTITIES<br>(Kilograms Live weight) | DIFFERENCE % <sup>1)</sup> | OBSERVATIONS |
|---------|---|--|---|----------------------------|--------------|
|         |   |  |   |                            |              |
|         |   |  |   |                            |              |
|         |   |  |   |                            |              |
|         |   |  |   |                            |              |
|         |   |  |   |                            |              |
|         |   |  |   |                            |              |
|         |   |  |   |                            |              |
|         |   |  |   |                            |              |
|         |   |  |   |                            |              |
| TOTAL   |   |  |   |                            |              |

1. Difference between the quantities on board as determined by the inspectors and the total quantities on board as declared by the master.



**B.5. FISHING GEAR AND MARKINGS**

Checked: Y / N

**B.5.1.** Type of fishing gear used (Attachment IA): FPO**B.5.2.** Type of net attachments used (Attachment IB): .....**B.5.3.** Stationary gear used marked: Y / N Comment: .....**B.5.4.** Unused gear securely lashed and stowed: Y / N Comment: .....**B.5.5. MESH MEASUREMENT OF GEAR USED**

Checked: Y / N

**B.5.5.1.** Cod end (inclusive of lengthener(s), if any – Sample of 20 meshes)

| Type of Gear <sup>1)</sup> | CONDITION: WET/DRY                  |  |  |  |  |  |  |  |  |  | MATERIAL:..... |  |  |  |  |  |  |  |  |  | Average width (in mm) | Legal size (in mm) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|                            | MESH SIZE (WIDTH)<br>In Millimeters |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                       |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                            |                                     |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                       |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

1. Attachment.....

**B.5.5.2.** Chafer Samples of ..... meshes

| Type <sup>1)</sup> | CONDITION: WET/DRY                  |  |  |  |  |  |  |  |  |  | MATERIAL:..... |  |  |  |  |  |  |  |  |  | Average width<br>(in mm) | Legal size<br>(in mm) |
|--------------------|-------------------------------------|--|--|--|--|--|--|--|--|--|----------------|--|--|--|--|--|--|--|--|--|--------------------------|-----------------------|
|                    | MESH SIZE (WIDTH)<br>In Millimeters |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                          |                       |
|                    |                                     |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                          |                       |
|                    |                                     |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                          |                       |
|                    |                                     |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                          |                       |

1. Attachment.....

**B.5.5.3.** Rest of net – Sample of 20 meshes

| Type <sup>1)</sup> | CONDITION: WET/DRY                  |  |  |  |  |  |  |  |  |  | MATERIAL:..... |  |  |  |  |  |  |  |  |  | Average width<br>(in mm) | Legal size<br>(in mm) |
|--------------------|-------------------------------------|--|--|--|--|--|--|--|--|--|----------------|--|--|--|--|--|--|--|--|--|--------------------------|-----------------------|
|                    | MESH SIZE (WIDTH)<br>In Millimeters |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                          |                       |
|                    |                                     |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                          |                       |
|                    |                                     |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                          |                       |
|                    |                                     |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                          |                       |

1. Attachment.....



## PART C. EVALUATION

### C.1. ANALYSIS OF CATCHES OF THE LAST HAUL

Checked: Y / N

| SAMPLE TAKEN: Y / N    |                                     | Weight:..... in Kgs. |            | VISUAL ESTIMATE Y / N |  |
|------------------------|-------------------------------------|----------------------|------------|-----------------------|--|
| SPECIES FAO Alpha Code | Weight of Species (live weight Kgs) | % Undersized Fish    | % Discards | Remarks               |  |
|                        |                                     |                      |            |                       |  |
|                        |                                     |                      |            |                       |  |
|                        |                                     |                      |            |                       |  |
|                        |                                     |                      |            |                       |  |
|                        |                                     |                      |            |                       |  |
|                        |                                     |                      |            |                       |  |
|                        |                                     |                      |            |                       |  |
|                        |                                     |                      |            |                       |  |
|                        |                                     |                      |            |                       |  |
|                        |                                     |                      |            |                       |  |
| TOTAL                  |                                     |                      |            |                       |  |

## PART D. COOPERATION

**D.1.** Level of cooperation deemed appropriate: Y/N

**D.1.1.** If not, indicate the shortcomings:

- ☐ (a) prevented an inspector from carrying out his duties;
- ☐ (b) falsifying or concealing the markings, identity or registration of the fishing vessel;
- ☐ (c) concealing, tampering with or disposing of evidence relating to an investigation;
- ☐ (d) failure to facilitate prompt and safe boarding and disembarkation;
- ☐ (e) failure to allow the inspectors to communicate with authorities of the flag contracting Party and the inspecting contracting Party;
- ☐ (f) failure to provide access to relevant areas, decks and rooms of the fishing vessel, catch (whether processed or not) nets or other gear, equipment, and any relevant documents

Observations by the inspectors, if any: NO REMARKS

Initials: .....



## PART E. INFRINGEMENTS AND OBSERVATIONS

### E.1. INFRINGEMENTS NOTED

| CODE <sup>1)</sup> | Cite NEAFC provision(s) violated and summarise observations and pertinent facts |
|--------------------|---|
|                    | NO REMARKS  |
|                    |   |
|                    |   |
|                    |   |
|                    |   |
|                    |   |
|                    |   |
|                    |   |
|                    |   |
|                    |   |
|                    |   |
|                    |   |
| Seal Number(s)     | Refer to evidence, documentation or photographs                                 |
|                    |   |
|                    |   |
|                    |   |
|                    |   |

1. Attachment.....

## E.2. OBSERVATIONS BY THE INSPECTORS

NO REMARKS.

Initials: EB

Statement of witness: NO REMARKS

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
Name: \_\_\_\_\_ Address: \_\_\_\_\_



No. 2011074

11. 12. 2016

I, the undersigned, Master of the vessel SOLOUS hereby confirm that a copy of this report and second photographs taken, if any, have been delivered to me on this date. My signature does not constitute acceptance of any part of the contents of this report, except my own observations, if any.

Signature: [Signature] Date: 15.01.2016

Date 15.01.16 and time arrived on board 1340 UTC. Date 15.01.16 and time of departure 1520 UTC  
Where appropriate, date..... and time of the termination of the inspection..... UTC  
Inspectors signatur(s) .....  
Inspectors name(s) .....

