

PORT STATE CONTROL FORM – PSC 1

PART A: To be completed by the Master of the Vessel. Please use black ink

Name of Vessel:	IMO Number:¹	Radio Call Sign:	Flag State:
Email Address:	Telephone Number:	Fax Number:	Inmarsat Number:
Port of Landing or Transshipment:			
	Date:		Time UTC:
Estimated Time of Arrival:			

Total catch on board – all areas						Catch to be landed ²	
Species ³	Product ⁴	Area of catch			Conversion factor	Product weight (kg)	Product weight (kg)
		NEAFC CA (ICES subareas and divisions)	NAFO RA (Sub Division)	Other areas			

PART B: For official use only – to be completed by the Flag State

The Flag State of the vessel must respond to the following questions by marking in the box "Yes" or "No"	NEAFC CA		NAFO RA	
	Yes	No	Yes	No
a) The fishing vessel declared to have caught the fish had sufficient quota for the species declared				
b) The quantities on board have been duly reported and taken into account for the calculation of any catch or effort limitations that may be applicable				
c) The fishing vessel declared to have caught the fish had authorisation to fish in the area declared				
d) The presence of the fishing vessel in the area of catch declared has been verified according to VMS data				

Flag State confirmation: *I confirm that the above information is complete, true and correct to the best of my knowledge and belief.*

Name and Title:		Date:	
Signature:	Official Stamp:		

PART C: For official use only – to be completed by the Port State

Name of Port State:				
Authorisation:	Yes:		No:	
Signature:	Official Stamp:			

1. Fishing vessels not assigned an IMO number shall provide their external registration number
 2. If necessary an additional form or forms shall be used 3. FAO Species Codes – NEAFC Annex V - NAFO Annex II
 4. Product presentations – NEAFC Appendix I to Annex IV – NAFO Annex XX (C)