

**Proposed Fishing Plan for
Catcher Vessels 60 ft. LOA or Greater Using Trawl Gear Except
Vessels Delivering Only Unsorted Codends to Another Vessel**

CDQ Group Name: _____

Vessel Name:	Vessel contact information - Name of Person:
Federal Fisheries Permit #:	Mailing address:
ADF&G #:	
LOA:	Phone number:
This vessel will be delivering CDQ catch to the following shoreside plants or processor vessels (List all processor names that apply):	FAX number:
	e-mail address (not required):
	How many CDQ observers will be aboard this vessel during groundfish CDQ fishing?

Method that will be used to determine CDQ and PSQ catch for this vessel (check one):

- _____ NMFS standard sources of data
 _____ Alternative method described in attached proposal

Fishery (if information differs by fishery)	Area	Average (while CDQ fishing)			Maximum (while CDQ fishing)		
		# of Hauls	Weight (mt)	Time (hrs)	# of Hauls	Weight (mt)	Time (hrs)

(rev 4/14/00)