Fisheries and Oceans Canada | Pêches et Océans Canada

FISH SLIP

OFFICIAL USE ONLY
FISH SLIP NUMBER
COMPANY CODE

Personal Use _____ **Public Sale** _____

HARVESTER'S NAME Vessel Master Name
HARVESTER'S ADDRESS Vessel Master Address

BUYER NAME
BUYER ADDRESS
BUYER PHONE
LOCATION OF SALE / PROCESSING PLANT

PACIFIC FISHERY MANAGEMENT AREA	DAYS FISHED
TOTAL	

PACKER NAME
PACKER VRN

TRIP LENGTH IN DAYS	

HAIL-IN #	Trip Identification #

VRN
VESSEL NAME
LICENCE

GEAR

GILLNET ☐ SEINE ☐

TROLL ☐ TROLL FREEZER ☐

OTHER _____

LANDING DATE

DD	MM	YYYY

Landing Time: ____:_____AM/PM

PIECES	WEIGHT		SPECIES	LANDED FORM	DISPOSITION if not for human consumption	PRICE	VALUE
	☐ lbs	☐ kg					

TOTAL _____

MARKETING COUNCIL LEVY _____

EMPLOYMENT INSURANCE _____

CASH _____

CREDIT TO _____

I certify that the above information is complete and correct.

Harvester's signature FULL NAME FIN

Vessel Master/Offloader Print name

Tallyman's signature Print name