

NOTICE OF OFFICE OF MANAGEMENT AND BUDGET ACTION

Madeleine Clayton 02/22/2001
Departmental Forms Clearance Officer
Office of the Chief Information Officer
14th and Constitution Ave. NW.
Room 6086
Washington, DC 20230

In accordance with the Paperwork Reduction Act, OMB has taken the following action on your request for approval of the reinstatement of an information collection received on 11/06/2000.

TITLE: At-Sea Scale Certification Program

AGENCY FORM NUMBER(S): None

ACTION : APPROVED

OMB NO.: 0648-0330

EXPIRATION DATE: 02/29/2004

BURDEN	RESPONSES	BURDEN HOURS	BURDEN COSTS
Previous	0	0	0
New	8,002	3,508	6
Difference	8,002	3,508	6
Program Change		3,508	6
Adjustment		0	0

TERMS OF CLEARANCE: None

NOTE: The agency is required to display the OMB control number and inform respondents of its legal significance (see 5 CFR 1320.5(b)).

OMB Authorizing Official Title

Donald R. Arbuckle Deputy Administrator, Office of
Information and Regulatory Affairs

PAPERWORK REDUCTION ACT SUBMISSION

Please read the instructions before completing this form. For additional forms or assistance in completing this form, contact your agency's Paperwork Clearance Officer. Send two copies of this form, the collection instrument to be reviewed, the supporting statement, and any additional documentation to: Office of Information and Regulatory Affairs, Office of Management and Budget, Docket Library, Room 10102, 725 17th Street NW, Washington, DC 20503.

1. Agency/Subagency originating request	2. OMB control number b. <input type="checkbox"/> None a. _____ - _____
3. Type of information collection (<i>check one</i>) a. <input type="checkbox"/> New Collection b. <input type="checkbox"/> Revision of a currently approved collection c. <input type="checkbox"/> Extension of a currently approved collection d. <input type="checkbox"/> Reinstatement, without change, of a previously approved collection for which approval has expired e. <input type="checkbox"/> Reinstatement, with change, of a previously approved collection for which approval has expired f. <input type="checkbox"/> Existing collection in use without an OMB control number For b-f, note Item A2 of Supporting Statement instructions	4. Type of review requested (<i>check one</i>) a. <input type="checkbox"/> Regular submission b. <input type="checkbox"/> Emergency - Approval requested by _____ / _____ / _____ c. <input type="checkbox"/> Delegated
7. Title	5. Small entities Will this information collection have a significant economic impact on a substantial number of small entities? <input type="checkbox"/> Yes <input type="checkbox"/> No
8. Agency form number(s) (<i>if applicable</i>)	6. Requested expiration date a. <input type="checkbox"/> Three years from approval date b. <input type="checkbox"/> Other Specify: _____ / _____
9. Keywords	
10. Abstract	
11. Affected public (<i>Mark primary with "P" and all others that apply with "x"</i>) a. ___ Individuals or households d. ___ Farms b. ___ Business or other for-profit e. ___ Federal Government c. ___ Not-for-profit institutions f. ___ State, Local or Tribal Government	12. Obligation to respond (<i>check one</i>) a. <input type="checkbox"/> Voluntary b. <input type="checkbox"/> Required to obtain or retain benefits c. <input type="checkbox"/> Mandatory
13. Annual recordkeeping and reporting burden a. Number of respondents _____ b. Total annual responses _____ 1. Percentage of these responses collected electronically _____ % c. Total annual hours requested _____ d. Current OMB inventory _____ e. Difference _____ f. Explanation of difference 1. Program change _____ 2. Adjustment _____	14. Annual reporting and recordkeeping cost burden (<i>in thousands of dollars</i>) a. Total annualized capital/startup costs _____ b. Total annual costs (O&M) _____ c. Total annualized cost requested _____ d. Current OMB inventory _____ e. Difference _____ f. Explanation of difference 1. Program change _____ 2. Adjustment _____
15. Purpose of information collection (<i>Mark primary with "P" and all others that apply with "X"</i>) a. ___ Application for benefits e. ___ Program planning or management b. ___ Program evaluation f. ___ Research c. ___ General purpose statistics g. ___ Regulatory or compliance d. ___ Audit	16. Frequency of recordkeeping or reporting (<i>check all that apply</i>) a. <input type="checkbox"/> Recordkeeping b. <input type="checkbox"/> Third party disclosure c. <input type="checkbox"/> Reporting 1. <input type="checkbox"/> On occasion 2. <input type="checkbox"/> Weekly 3. <input type="checkbox"/> Monthly 4. <input type="checkbox"/> Quarterly 5. <input type="checkbox"/> Semi-annually 6. <input type="checkbox"/> Annually 7. <input type="checkbox"/> Biennially 8. <input type="checkbox"/> Other (describe) _____
17. Statistical methods Does this information collection employ statistical methods <input type="checkbox"/> Yes <input type="checkbox"/> No	18. Agency Contact (person who can best answer questions regarding the content of this submission) Name: _____ Phone: _____

19. Certification for Paperwork Reduction Act Submissions

On behalf of this Federal Agency, I certify that the collection of information encompassed by this request complies with 5 CFR 1320.9

NOTE: The text of 5 CFR 1320.9, and the related provisions of 5 CFR 1320.8(b)(3), appear at the end of the instructions. *The certification is to be made with reference to those regulatory provisions as set forth in the instructions.*

The following is a summary of the topics, regarding the proposed collection of information, that the certification covers:

- (a) It is necessary for the proper performance of agency functions;
- (b) It avoids unnecessary duplication;
- (c) It reduces burden on small entities;
- (d) It used plain, coherent, and unambiguous terminology that is understandable to respondents;
- (e) Its implementation will be consistent and compatible with current reporting and recordkeeping practices;
- (f) It indicates the retention period for recordkeeping requirements;
- (g) It informs respondents of the information called for under 5 CFR 1320.8(b)(3):
 - (i) Why the information is being collected;
 - (ii) Use of information;
 - (iii) Burden estimate;
 - (iv) Nature of response (voluntary, required for a benefit, mandatory);
 - (v) Nature and extent of confidentiality; and
 - (vi) Need to display currently valid OMB control number;
- (h) It was developed by an office that has planned and allocated resources for the efficient and effective management and use of the information to be collected (see note in Item 19 of instructions);
- (i) It uses effective and efficient statistical survey methodology; and
- (j) It makes appropriate use of information technology.

If you are unable to certify compliance with any of the provisions, identify the item below and explain the reason in Item 18 of the Supporting Statement.

Signature of Senior Official or designee

Date

Agency Certification (signature of Assistant Administrator or head of MB staff for L.O.s, or of the Director of a Program or Staff Office)

Signature

Date

Signature of NOAA Clearance Officer

Signature

Date

Supporting Statement for OMB Clearance for the At-Sea Scales Certification Program

Section A. Justification.

1. Why the information collection is necessary.

The at-sea scales program collection of information has been previously approved as OMB 0648-0330. When NMFS began requiring the weighing of total catch by catcher/processors and motherships in the pollock fisheries, the additional respondent hours were added to OMB 0648-0401. The requirement to request an observer sampling station inspection is part of OMB 0648-0269. Because of the similarity of these programs, all aspects are being combined.

The National Marine Fisheries Service (NMFS) manages the commercial groundfish harvest off Alaska based on an annual total allowable catch for each species. This is based on “round” weight, or the weight of the fish prior to processing. However, much of the fish harvested off Alaska is harvested by vessels that process the catch at-sea and do not land whole fish. One way that NMFS uses to estimate the total weight of fish harvested by processing vessels is by requiring the vessel to weigh all or part of their catch on a motion-compensated scale. At this time, two groups of vessels are required to weigh all catch at-sea: catcher processors and motherships that are listed under the American Fisheries act as eligible to harvest pollock; and trawl catcher processors and motherships that are harvesting fish under the Community Development Quota Program (CDQ quota). Non-trawl catcher/processors that harvest CDQ quota are not required to weigh all catch, but they are required to weigh samples of catch. All of these vessels must also provide an observer sampling station where NMFS-certified observers can work. The station must be inspected and approved annually by NMFS.

The information request described in this submission is necessary to ensure that:

1. scales used to weigh catch at sea are appropriate for that use and meet the performance and technical standards set forth in regulations;
2. scales are properly installed and function well at the dock prior to being used in a fishery requiring the weighing of catch at-sea;
3. scales continue to be accurate when in use during the fishing season;
4. scale inspectors employed by an agency other than the inspection agency designated by NMFS meet the requirements to inspect scales on behalf of NMFS;
5. scales and observer sampling station inspections can be arranged;

6. the total weight of all catch is reported accurately by vessels and shoreside processors.

General regulatory requirements for at-sea scales are found at 50 CFR 679.28(b). Regulations requiring the use of scales in the CDQ fisheries are found at 50 CFR 679.32(c)(4).

2. How, by whom, how often and for what purpose will the information be used.

In general, the information collected under this control number is used for program monitoring, inspection scheduling and regulatory compliance. The information collections are summarized below:

Information collection	How often is this information collected?	Who uses this information?	Why do we need this information?
Scale type evaluation	once for each scale type or model	NMFS scale-evaluation staff	to determine if a model of scale meets the requirements for type approval.
Request for scale inspection	annually	NMFS-authorized scale inspectors	to assist in scheduling scale inspections.
Scale approval sticker/ report	annually	NMFS-staff, observers	to ensure that a scale is approved for use.
Daily scale test	daily when use of the scale is required	observers, NMFS-enforcement, NMFS scale program staff	to ensure regulatory compliance, to monitor accuracy of scales.
Printed output from scale	daily when use of the scale required	observers, NMFS-enforcement	to audit catch records, to ensure compliance with quotas
Request for observer sampling station inspection	annually	NMFS-staff	to assist in evaluating proposed observer sampling stations and scheduling inspections
Application to inspect scales on behalf of NMFS	One time	NMFS-staff	to assist in evaluating scale inspectors from other agencies

2.a Application to be placed on NMFS'list of scales eligible for approval (Belt scale, automatic hopper scale, platform scale) This form has three versions, one for each major class of scale that NMFS can approve. The questions on the forms are identical in concept and differ only in the precise information requested when the information is specific to one scale type. A separate application must be completed by the manufacturer or manufacturer's representative for each scale model that is submitted for approval.

Block I. Information about the scale tested. This block supplies basic background and contact information so that NMFS can maintain accurate contact records.

- Name, address, phone and fax number of manufacturer
- Name address, phone and fax number of manufacturer's representative
- Model and serial # of scale submitted for evaluation.

Block II. Information about all scales. Frequently scale manufacturers produce the same basic scale with different sizes, capacities or model numbers. This block allows the manufacturer to describe a "family" of similar scales so that all can be approved at one time. It also sets out the basic metrological characteristics of the scales.

- Model designation
- Value of scale divisions
- Maximum capacity
- Max flow, min flow, min totalized load (belt only)
- Belt speed, weigh length (belt only)
- Number of scale divisions (hopper and platform only)
- Minimum weightment and Minimum totalized load (hopper scales only)
- Minimum load and accuracy class (platform only).

Block III. Information about the certifying laboratory.

This block gives NMFS information on the independent laboratory that evaluated the scale. The information allows us to contact the lab directly if we need clarification.

- Name of laboratory
- Address, phone and fax for laboratory
- Name and Address of accrediting agency

Block IV. Certification of compliance. This block is to ensure that the manufacturer's representative believes the scale is in compliance with our regulations

- Signature of representative
- Date

Printed Name of representative

Block V. List of Attachments. This block helps the manufacturer's representative include the correct documentation that NMFS needs to approve the scale.

Block VI. General Requirements Checklist. This helps the manufacturer's representative to review the requirements for approval and to note any possible problems.

2.B. Inspection Request: At-sea scales. This form gives us the information we need to conduct and schedule a scale inspection. This form must be completed once a year by the owner or manager of each vessel that needs approved-scales.

Vessel name

Mailing address

Vessel location

Contact person on board

Phone and fax for contact person

Requested inspection date

Today's date

Phone number on vessel

Scales to be inspected

Will repair company be present (yes/no)

Repair company name.

2.C. Scale approval report/sticker This form is completed by the scale inspector. One form is completed for each scale approved. The vessel owner or operator must ensure that the report is available for inspection by authorized personnel (NMFS staff, United States Coast Guard, or NMFS observers) or that a "NMFS approved scale" sticker is on each approved scale. This form is completed by the NMFS scale inspector and does not impose a burden on the public. However, the vessel owner/operator must ensure that the scale sticker remains legible or that the scale approval report is available for inspection.

2.D. Record of daily scale tests. This form must be completed daily by the vessel operator or designated crew member when use of the scale is required. For vessels required to provide scales only when CDQ fishing, this is between 2 and 60 days per year. For catcher/processors and motherships authorized to harvest pollock under the American Fisheries act, this is approximately 200 days per year. This form helps NMFS to ensure that scales are tested daily and remain accurate. It also helps to determine how well scales are performing in the fisheries. There are three versions of this form and the vessel owner or operator may use whichever form they wish. The first version is for vessels that choose to test their scales with fish, the second is for vessels that choose to test their scales with sand bags. Finally, an electronic version is made available for vessels that wish to use an excel spreadsheet. These forms do not need to be submitted to NMFS, but they must be available for inspection on board

the vessel during the fishing year and retained by the vessel owner for three years after the test occurred.

2.E. Printed output from the scale. All scales used to weigh total catch at-sea are equipped with a printer. When use of the scale is required, the vessel operator or designated crew member must printout a record of each haul weighed that day. For vessels required to provide scales only when CDQ fishing, this is between 2 and 60 printouts per year. For catcher/processors and motherships authorized to harvest pollock under the American Fisheries act, this is approximately 200 printouts per year. The required information on the printout is programmed into the scale software and printing is nearly automatic. This printout is used by NMFS staff and observers to maintain accurate records of catch. The printout also forms the basis of an audit trail for each haul. This audit trail can be used to resolve inconsistencies in catch reports submitted by the observer and the vessel. These printouts do not need to be submitted to NMFS, but they must be available for inspection on board the vessel during the fishing year and retained by the vessel owner for three years after the test occurred. The printed output must show:

- Vessel name
- Permit number
- Haul or set number
- Total weight of the haul
- Total accumulated weight on scale.

2.F. Observer sampling station inspection request form. This form gives us the basic information we need to conduct and schedule an observer sampling station inspection. This form must be completed once a year by the owner or manager of each vessel that needs an observer sampling station. The vessel representative must also attach a diagram drawn to scale of the proposed observer sampling station. The form requests:

- Vessel name
- Federal fisheries permit number
- Mailing address
- Vessel location
- Contact person on board
- Phone and fax for contact person
- Requested inspection date
- Today's date
- Applicant's signature
- Have you received and passed a scale inspection? (yes/no)
- If no would you like the inspections at the same time? (yes/no)

2.G. Application to inspect scales on behalf of NMFS. (new information collection, actual form has not been made). Regulations at 679.28(b)(2)(iii)(B) authorize weights and measures inspectors employed by a U.S., state or local weights and measures agency to inspect scales on behalf of NMFS.

This form gives us basic information on scale inspectors from other agencies that may wish to inspect scales on behalf of NMFS, and is sufficient to determine whether they meet the qualifications of 679.28(b)(2)(iii)(B). This form would have to be completed one time by individuals wishing to inspect scales. The form requests:

- Applicant name
- Applicant phone number
- Applicant fax number (if available)
- Employer
- Employer address
- Employer phone
- Signature and date.

The signature block is below a statement reading as follows:

"I am employed by a U.S., State, or local weights and measures agency and have been trained to conduct inspections of NMFS-approved scales".

3. To what extent are automated techniques used to reduce burden.

The at-sea scale inspection request form can be completed and submitted from our web page at www.fakr.noaa.gov.

The printed output from the scale requirements are programmed into each scale and complying is either automatic when the scale operator changes memories, or requires only invoking the "print" command on the scale display.

The daily scale test form is available as a Microsoft Excel template that can be installed on the vessel's computer if the operator wishes to do so.

The observer sampling station request form is available on our web page.

The scale type evaluation package is not available electronically. Because of the complexity of this process, we prefer that an applicant directly contact the program manager so that he can work with them personally on completing the package.

4. Efforts to identify duplication with other collections.

None of the information collected as part of this information collection duplicates other collections. This information collection is part of a specialized and technical program that is not like any other.

5. Methods used to reduce the impacts on small entities.

The proposed collection of information does not impose a significant impact on small entities.

6. Consequences to Federal programs if the information were collected less frequently.

Without the scale type approval information collections, NMFS would be unable to properly evaluate new models or types of scales as they are developed. This could prevent vessel owners from obtaining a better product. It would also prevent scale manufacturers from having the most recent versions of their scales approved for use. Without the inspection request forms, NMFS would be unable to coordinate and schedule scale inspections expeditiously. Without the daily scale test results and the printed output from the scale, NMFS would be unable to effectively audit catch in fisheries requiring use of scales. Only the daily scale testing and printed output could occur less frequently, the other collections occur only once a year or once per scale model. If the frequency of testing was reduced, we would not be as confident of the accuracy of the scales. Given that scales are used only in fisheries where there are expectations of highly accurate catch monitoring, this would not be acceptable.

7. Special Circumstances.

There are no special circumstances associated with this information collection. Vessel operators are required to test scales and printout haul weight totals daily when the scale is in use. However this information does not need to be submitted to NMFS, it only needs to be made available if requested by authorized personnel.

8. Public comment or consultation on this information collection

NMFS published a notice in the Federal Register on May 23, 2000 (65 FR 33298) soliciting public comments on the information collection. No comments were received.

9. Gifts or payments to respondents.

There are no plans to provide any payment or gift to respondents.

10. Assurances of confidentiality

The information collected is confidential under section 402(b) of the Magnuson-Stevens Act (16 U.S.C. 1801, et seq.). It is also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics. These procedures have been implemented under the NMFS Operations Manual entitled “Data Security Handbook for the Northwest-Alaska Region, National Marine Fisheries Service”.

11. Collection of information of a private and sensitive nature.

This information collection does not involve information of a sensitive nature.

12 and 13. Total burden hours and costs of the collection-of-information for respondents.

Burden hours are summarized in Table 1. Costs and hours that are not self explanatory are described in more detail below.

12.A. Scale Type evaluation. Before NMFS can approve a model of scale for use, the manufacturer must submit the scale to a certified laboratory for evaluation and testing to insure that the scale meets international scale standards. This is an expensive and time consuming process. However, for a scale to be legal for trade in most countries, it must undergo this process. Thus, though we assume that a scale manufacturer is submitting their scale for approval only for use as a NMFS-approved scale, in most cases the manufacturer would seek this approval so that the scale would be acceptable for other applications. We estimate that having a scale evaluated by an independent laboratory to ensure that it meets the standards would cost approximately \$10,000. We also assume that a given model of scale has a market life of 5 years. This results in an annual cost of \$2,000 per year for laboratory testing.

The scale manufacturer must submit extensive documentation to NMFS for review. Our past experience has shown that this requires many hours. Because of the technical complexity of the approval process, NMFS staff and the manufacturer’s representatives must normally spend many hours analyzing the details of a given scale model. During the past two years, NMFS has approved 16 scale models made by three manufacturers. Depending on what type of scale (platform or flow) and how similar the scale is to models that have already been approved, the number of hours required to document the scales characteristics is variable. Based on conversations with the manufacturers representatives, we estimate that the following burdens for the four most common types of approval:

Platform scale, unique model:	80 hours
Platform scale, similar to a model that has already been approved:	20 hours
Flow scale, unique model:	190 hours
Flow scale, similar to a model that has already been approved:	30 hours

No scales have been submitted for approval since October of 1999 and we have no reason to assume that a manufacturer will submit another scale during the life of this information collection. However, to be conservative we have estimated that one manufacturer will submit a unique model of flow scale for evaluation and approval.

12.B. Daily scale test. Scales used to weigh total catch must be tested daily when their use is required. This test involves passing at least 400 kg of fish or test material across the total catch weighing scale

and then weighing the same material on a motion compensated platform scale. The two scales must agree within +/- 3 percent. This test takes approximately 45 minutes to perform. We estimate that the 18 boats currently engaged in AFA pollock fishery will be required to test their scales 200 days per year and that the 11 boats that are not authorized to engage in the AFA pollock fishery will need to test their scales 30 times per year.

12. C. Printed scale output. All boats that must test scales daily must also printout the weight of each haul when use of the scale is required. Thus, the number of responses is the same as for the Daily Scale Test form. Most boats are already equipped with a printer. However, we assume that the boats must purchase a dedicated dot matrix printer for this information collection. We assume that the printer will have a life of three years and an acquisition cost of \$420.00, for an annual cost of \$140.00

12.D. Other information collections. Self explanatory.

14. Annualized cost to the Federal Government.

This collection of information is an ongoing one, and new staff will not be required. Based on past experience the following staff hours are necessary to review and maintain the paperwork associated with this collection:

Scale type evaluation	
review submissions	80 hours/yr
maintain list of approved scales	20 hours/yr
Daily scale test	
collect submissions	20 hrs/yr
review and maintain submissions	20 hrs/yr
Printed scale output	
collect submissions	20 hrs/yr
review and maintain submissions	20 hrs/yr
Request for scale inspections	
send out and collect forms	4 hours/yr
Scale approval sticker	
replace lost stickers	2 hours/yr
maintain test records	2 hours/yr
Request for observer station inspection	
send out and collect forms	4 hours
TOTAL staff hours, all collections	196 hours

Based on an hourly rate of \$30.00, this represents an annual cost to the Federal Government of \$5,880.

15. Explain the reasons for any program adjustments

The at-sea scales program collection of information was originally approved under OMB 0648-0330, but that approval recently expired. This submission seeks re-approval for those requirements and to consolidate forms that have been approved under three previous OMB control numbers. When NMFS began requiring the weighing of total catch in the pollock fisheries, additional hours were added to OMB 0648-0401. The requirement to request an inspection of an observer sampling station is part of OMB 0648-0269. Because of the similarities of the programs, these are being combined.

16. Publication of results

We have no plans to tabulate the results of this information collection

17/18. Display of expiration date and certification statement

The expiration date is shown on all forms and the standard certification is either attached to each form or a part of it. Because of size constraints, the expiration date is not shown on the scale approval sticker, however, the expiration date is shown on the scale approval form that is given to the vessel owner with the sticker.

Table 1. Estimate of costs and burden hours.

	Scale Type Evaluation	Daily Scale Test	Printed scale output	Request for scale inspection	Scale approval sticker	Application to inspect scales	Request for observer station inspection
12. Estimate of Burden Hours							
Number of respondents	1	29	29	47	47	1	47
Frequency of response	One time	daily when required	daily when required	annual	annual	One time	annual
Responses per respondent	1	2 to 200	2 to 200	1	1	1	1
Total annual responses	0.3	3930	3930	47	47	0.3	47
Time per response	30 -190 hours	0.75 hours	0.1 hours	0.1 hours	0.1 hours	0.1 hours	2 hours
Total annualized time-all respondents	63 hours/yr	2948 hours/yr	393 hours/yr	5 hours/yr	5 hours/yr	0.03 hours/yr	94 hours/yr
13. Estimate of Cost Burden							
Capital and startup cost per respondent							
Submit scales for lab testing	\$ 2,000.00						
Purchase of printer			\$140.00				
Total cap. & startup cost-all respondents	\$2,000.00		\$4060.00				
Operation and maint. cost							
Supplies (binders, printer paper)	\$15.00	\$25.00	\$25.00				
Photocopying, fax	\$1.00			\$5.00			\$9.00
Total O & M--all respondents	\$16.00	\$25.00	\$25.00	\$5.00			\$9.00

National Marine Fisheries Service
P.O. Box 21668
Juneau, AK 99802-1668
(907) 586-7228
FAX (907) 586-7465



GENERAL

Company name:	Vessel name:
Mailing address:	Exact location of vessel:
Contact person on board:	Telephone Number for contact person:
Requested Inspection date:	FAX Number for contact person:
Today's date:	Please give a phone number on the vessel where the inspector may be contacted during the inspection:

SCALES TO BE INSPECTED

	Manufacturer	Model
1		
2		
Will the repair company be on site at time of inspection?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Company name:	Contact person and phone:	

At the time of scale inspection please make sure that:

- 1) the scale is installed in a rigid and level manner,
- 2) the display and printer are connected and operational,
- 3) belts leading to the scale are connected and operational (not applicable to platform and hanging scales),
- 4) test weights and test weight certification documents are available for inspection (platform scales only),
- 5) a crew member will be available to help the inspector transport test materials and conduct the testing.

For more information contact: Alan Kinsolving, At-sea scales program coordinator,
Phone: (907)-586-7237
Email: alan.kinsolving@noaa.gov

OMB No. 0648-0330; Expires 09/30/00

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 6 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Sue Salveson, Assistant Regional Administrator, Sustainable Fisheries Division, Alaska Region, NMFS, P.O. Box 21668, Juneau, AK 99802 (Attn: Lori Gravel).

ADDITIONAL INFORMATION:

Before completing this form please note the following: 1) NMFS cannot conduct or sponsor this information request, and you are not required to respond to this information request, unless the form displays a currently valid OMB control number; 2) this information is being used to manage the At-Sea Scales Program; 3) Federal law and regulations require and authorize NMFS to manage commercial fishing effort; 4) Submission of this information is required for scales approved by NMFS to weigh catch at sea; 5) Responses to this information request are not confidential except as required under the Privacy Act.

Record of Daily Scale Tests

Vessel Name: _____ Date: _____

Time test started: _____

I. Weigh Fish on Observer Platform Scale

Basket #	Wt Fish + Basket (kg)	Basket #	Wt Fish + Basket (kg)	Basket #	Wt Fish + Basket (kg)	Basket #	Wt Fish + Basket (kg)
1		8		15		21	
2		9		16		22	
3		10		17		23	
4		11		18		24	
5		12		19		25	
6		13		20		26	
7		14		Total weight all fish+baskets			

II. Calculate Percent Error of Flow Scale

Scale Indicator: _____ Begin Test: kg

End Test: kg

Total weight fish and baskets (kg)	- Weight of Baskets	= Platform scale weight of fish	Weight of Fish on Flow Scale (kg)	Error (B) - (A)	% Error = (C)÷(A) x 100
		(A)	(B)	(C)	

III. Sea Conditions (Beaufort Scale) at Time of Scale Test (Circle One):

0 1 2 3 4 5 6 7 8 9 10 11 12

Signature of vessel operator
I observed this test and to the best of my knowledge it was conducted in accordance with 50 CFR 679.28 (b)(3)
Signature of observer

INSTRUCTIONS

1. Collect approximately 400 kg of fish in baskets and weigh the baskets of fish on the platform scale. Record the weight of each basket of fish (basket plus fish) in Section I.
2. Record the total weight of all baskets plus fish in the first box in Section II.
3. Record the weight of the baskets in the second box. Subtract the weight of the baskets from the total weight of fish plus baskets to determine the weight of the fish only, record this weight in the third box in Section II. This is the platform scale weight of the fish (A).
4. Record the weight displayed on the flow scale before and after the test fish are weighed. .
5. Weigh the fish from the baskets on the flow scale. Record the weight in the fourth box of Section II (B).
6. Calculate error of flow scale by subtracting the platform scale weight (A) from the flow scale weight (B). Record the error (C) in the fifth box of Section II.
7. Calculate percent error by dividing the error (C) by the known weight of the fish (A) and multiplying by 100. Record this information in the last box of Section II. The scale is weighing within 3 percent error if the result is between -3.0% and +3.0%.
8. Record Beaufort Scale sea conditions at time of test.
9. Have form signed by vessel operator and observer..

Additional Information

- A daily scale test must be conducted once every 24 hours when the scale is being used to weigh catch at-sea.
- If the scale fails the daily test, it may be re-tested at any time. However, it may not be used to weigh fish until it passes the daily test.
- This form must be maintained on board the vessel until the end of the fishing year in which it was completed. It must be retained by the vessel owner for three years, and must be made available to NMFS personnel, observers or authorized officers when requested.
- Questions or comments concerning this form or the daily test can be directed to:
 - Alan Kinsolving
 - Scales Program Coordinator
 - National Marine Fisheries Service
 - P.O. Box 21668
 - Juneau, AK 99801
 - Phone: (907)-586-7237
 - Fax: (907)-586-7465
 - Email alan.kinsolving@noaa.gov

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 45 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Sue Salvesson, Assistant Regional Administrator, Sustainable Fisheries Division, Alaska Region, NMFS, P.O. Box 21668, Juneau, AK 99802 (Attn: Lori Gravel).

ADDITIONAL INFORMATION: Before completing this form please note the following: 1) NMFS cannot conduct or sponsor this information request, and you are not required to respond to this information request, unless the form displays a currently valid OMB control number; 2) this information is being used to manage the At-Sea Scales Program; 3) Federal law and regulations require and authorize NMFS to manage commercial fishing effort; 4) Submission of this information is required for scales approved by NMFS to weigh catch at sea; 5) Responses to this information request are not confidential except as required under the Privacy Act.

OBSERVER SAMPLING STATION INSPECTION REQUEST FORM	Fax or mail completed forms and diagrams to: Pete Risse North Pacific Groundfish Observer Program 222 West 7 th Avenue, Box 7 Anchorage, AK 99513 907-271-1314 Fax 907-271-1315 E-mail pete.risse@noaa.gov
Company Name:	Vessel Name:
Federal Fishery Permit Number:	Location of vessel including street address, pier, and city:
Mailing Address:	
Contact Person On Vessel:	Telephone Number For Contact Person:
Requested Inspection Date:	Fax Number For Contact Person:
Today's Date:	Applicant's Signature:

Have you received and passed a scale inspection? Yes No

If No would you like observer sample station and scale inspections to be held at the same time? Yes No

Sample station inspections will be scheduled within ten (10) working days of receiving a request. Requests for inspections in Dutch Harbor will be scheduled within ten (10) days, but may be delayed several days due to weather or logistics. **Please include your diagrams drawn to scale with your application.**

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Sue Salvesson, Assistant Regional Administrator, Sustainable Fisheries Division, Alaska Region, NMFS, P.O. Box 21668, Juneau, AK 99802 (Attn: Lori Gravel).

ADDITIONAL INFORMATION: Before completing this form please note the following: 1) NMFS cannot conduct or sponsor this information request, and you are not required to respond to this information request, unless the form displays a currently valid OMB control number; 2) this information is being used to manage the At-Sea Scales Program; 3) Federal law and regulations require and authorize NMFS to manage commercial fishing effort; 4) Submission of this information is required for scales approved by NMFS to weigh catch at sea; 5) Responses to this information request are not confidential except as required under the Privacy Act.

<p>Scale Type Evaluation Automatic Hopper Scales</p>	<p>National Marine Fisheries Service P.O. Box 21668 Juneau, AK 99802-1668 (907) 586-7228 FAX (907) 586-7465</p>	
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I. INFORMATION ABOUT THE SCALE TESTED	
Name of Scale Manufacturer:	Name of Manufacturer's Representative:
Mailing Address of Scale Manufacturer:	Mailing Address of Representative, if different:
Model of Scale Submitted for Evaluation:	Telephone Number of Representative:
Serial Number of Scale Submitted for Evaluation:	FAX Number of Representative:

II. INFORMATION ABOUT ALL SCALES						
Provide information about the scale submitted for evaluation at #1. Identify all other models of scales of the same type of scale that will be covered by laboratory evaluation.						
#	Model Designation	Maximum Capacity	Value of Scale Divisions	Number of Scale Divisions	Minimum Weighment	Minimum Totalized Load
1						
2						
3						
4						
5						
6						
7						
8						
9						

III. INFORMATION ABOUT THE CERTIFYING LABORATORY

Name of Laboratory:	Name and Address of Government Agency Accrediting Laboratory:
Mailing Address of Laboratory:	
Telephone: Fax:	

IV. CERTIFICATION OF COMPLIANCE WITH NMFS AT-SEA SCALE REQUIREMENTS

I certify that I have examined the scale or scale component described above and found it to be in compliance with the performance and technical requirements in 50 CFR 679 (§679.28(b)(2) and Appendix A) as indicated in the attached checklist and test report forms.

Signature of Manufacturer's Representative:	Date
Printed Name of Manufacturer Representative:	

V. LIST OF ATTACHMENTS

A. Written description and diagrams of the scale indicating primary features of the scale, how the scale operates, and how the scale compensates for vessel motion.

B. Describe the difference between the scale submitted for laboratory evaluation and all other scales for which the laboratory evaluation will apply.

C. Laboratory test results

D. List of adjustments included in the audit trail

D. Other (please list)

VI. GENERAL REQUIREMENTS CHECKLIST--AUTOMATIC HOPPER SCALE

Appendix A reference	Title	+	-	Remarks
3.3.1.1	General: Indicators and Printers			
3.3.1.2	Values Defined			
3.3.1.3	Units			
3.3.1.4	Value of the Scale Division			
3.3.1.5	Weighing Sequence			
3.3.1.6	Printing Sequence			
3.3.1.7	Printed Information			
3.3.1.8	Permanence of Markings			
3.3.1.9	Range of Indication			
3.3.1.10	Non-Resettable Values			
3.1.1.11	Power Loss			
3.3.1.12	Adjustable Components			
3.3.1.13	Audit Trail			
3.3.1.14.1	Manual Zero Load Adjustment			
3.3.1.14.2	Semi-automatic Zero Load Adjustment			
3.3.1.15	Damping Means			
3.3.1.16	Adjustments to Scale Weights			
3.3.2	Interlocks and Gate Control			
3.3.3	Overfill Sensor			
3.3.4.1	Overload Protection			
3.3.4.2	Adjustable Components			
3.3.4.3	Motion Compensation			
3.3.6	Marking			
3.3.6.1	Presentation			

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 190 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Sue Salvesson, Assistant Regional Administrator, Sustainable Fisheries Division, Alaska Region, NMFS, P.O. Box 21668, Juneau, AK 99802 (Attn: Lori Gravel).

ADDITIONAL INFORMATION: Before completing this form please note the following: 1) NMFS cannot conduct or sponsor this information request, and you are not required to respond to this information request, unless the form displays a currently valid OMB control number; 2) this information is being used to manage the At-Sea Scales Program; 3) Federal law and regulations require and authorize NMFS to manage commercial fishing effort; 4) Submission of this information is required for scales approved by NMFS to weigh catch at sea; 5) Responses to this information request are not confidential except as required under the Privacy Act.

INSTRUCTIONS

Application to be placed on NMFS' list of scales eligible for approval AUTOMATIC HOPPER SCALES

Block I. Information about the scale tested . Self explanatory

Block II. Information about all scales. More than one model of scale may be evaluated at the same time. However, the models may differ from the model submitted for evaluation only in the elements of the scale that perform motion compensation, the size or capacity of the scale, and the software used by the scale. If other elements differ, a separate application must be completed.

Model Designation: Enter the model name or number that will be visible to the scale inspector and will allow him to clearly determine that the scale he is inspecting is on the list of approved scales.

Maximum capacity: Report in kilograms.

Value of scale divisions: Self explanatory.

Number of scale divisions: Is the maximum capacity divided by the value of scale divisions.

Minimum Weighment: This must not be less than 20 percent of the maximum capacity or less than 100 scale intervals (except the final weighment of a lot).

Minimum Totalized Load: This may not be less than 4 weighments, and should be reported in kilograms.

Block III. Information about the certifying laboratory: Information about the laboratory which performed the laboratory evaluation and type testing. The laboratory must be accredited by the government of the country in which testing was conducted.

Block IV. Certification of compliance: Self explanatory.

Block V. List of attachments:

- A. The information provided to NMFS must be sufficient to allow NMFS to judge whether the scale is appropriate for its intended use on a vessel at-sea. Requirements for motion compensation are specifically described in Appendix A, section 2.3.2.6.
- B. Each scale listed in Block II must be described.
- C. Test results must be attached which either:
 1. led to an OIML certificate of conformance.
 2. demonstrate that the scale meets all test requirements in Appendix A or the annex to Appendix A of 50 CFR 679.28. An NTEP certificate will be accepted only for the specific influence factor tests which were conducted to receive the NTEP certificate additional information must be submitted to verify compliance with the laboratory tests that are not performed under the NTEP.
- D. List of adjustments included in the audit trail.
- E. Other. This should include any supporting information that will assist NMFS in determining if the scale meets the performance and technical standards.

Block VI. General Requirements checklist: This checklist is provided for your own convenience and does not need to be submitted to NMFS. Each item on this list is required before a scale may be approved by NMFS. For each item on the checklist, there is a reference to a paragraph of Appendix A to 50 CFR 679.28 (attached). If the scale being evaluated meets that criterion, place a mark in the plus column. If a scale does not meet the criterion, or you are not certain whether it meets the criterion, place a mark in the minus column.

**Scale Type Evaluation
Platform and Hanging Scales**

National Marine Fisheries Service
 P.O. Box 21668
 Juneau, AK 99802-1668
 (907) 586-7228
 FAX (907) 586-7465



I. INFORMATION ABOUT THE SCALE TESTED

Name of Scale Manufacturer:	Name of Manufacturer's Representative:
Mailing Address of Scale Manufacturer:	Mailing Address of Representative, if different:
Model of Scale Submitted for Evaluation:	Telephone Number of Representative:
Serial Number of Scale Submitted for Evaluation:	FAX Number of Representative:

II. INFORMATION ABOUT ALL SCALES

Provide information about the scale submitted for evaluation at #1. Identify all other models of scales of the same type of scale that will be covered by laboratory evaluation.

#	Model Designation	Maximum Capacity	Value of Scale Divisions	Number of Scale Divisions	Minimum Load	Accuracy Class
1						
2						
3						
4						
5						
6						
7						
8						
9						

III. INFORMATION ABOUT THE CERTIFYING LABORATORY

Name of Laboratory:	Name and Address of Government Agency Accrediting Laboratory:
Mailing Address of Laboratory:	
Telephone: FAX:	

IV. CERTIFICATION OF COMPLIANCE WITH NMFS AT-SEA SCALE REQUIREMENTS

I certify that I have examined the scale or scale component described above and found it to be in compliance with the performance and technical requirements in 50 CFR 679 (§679.28(b)(2) and Appendix A) as indicated in the attached checklist and test report forms.

Signature of Manufacturer's Representative:	Date
Printed Name of Manufacturer Representative:	

V. LIST OF ATTACHMENTS

A. Written description and diagrams of the scale indicating primary features of the scale, how the scale operates, and how the scale compensates for vessel motion.

B. Describe the difference between the scale submitted for laboratory evaluation and all other scales for which the laboratory evaluation will apply.

C. Laboratory test results

D. List of adjustments included in the audit trail

D. Other (please list)

VI. GENERAL REQUIREMENTS CHECKLIST-PLATFORM OR HANGING SCALE

Appendix A reference	Title	+	-	Remarks
4.3.1.1	General: Indicators and Printers			
4.3.1.2	Values Defined			
4.3.1.3	Units			
4.3.1.4	Value of the Scale Division			
4.3.1.5	Printed Information			
4.3.1.6	Permanence of Markings			
4.3.1.7	Power Loss			
4.3.1.8(a)	Security Means			
4.3.1.8(b)	Audit Trail			
4.3.1.9	Zero-load Adjustment			
4.3.1.9.1	Manual			
4.3.1.9.2	Semi-automatic			
4.3.1.10	Damping Means			
4.3.2.1	Overload Protection			
4.3.2.2	Adjustable Components			
4.3.2.3	Motion Compensation			
4.3.4	Marking			
4.3.4.1	Presentation			

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 80 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Sue Salvesson, Assistant Regional Administrator, Sustainable Fisheries Division, Alaska Region, NMFS, P.O. Box 21668, Juneau, AK 99802 (Attn: Lori Gravel).

ADDITIONAL INFORMATION: Before completing this form please note the following: 1) NMFS cannot conduct or sponsor this information request, and you are not required to respond to this information request, unless the form displays a currently valid OMB control number; 2) this information is being used to manage the At-Sea Scales Program; 3) Federal law and regulations require and authorize NMFS to manage commercial fishing effort; 4) Submission of this information is required for scales approved by NMFS to weigh catch at sea; 5) Responses to this information request are not confidential except as required under the Privacy Act.

INSTRUCTIONS

Application to be placed on NMFS' list of scales eligible for approval PLATFORM AND HANGING SCALES

Block I. Information about the scale tested: Self explanatory.

Block II. Information about all scales: More than one model of scale may be evaluated at the same time. However, the models may differ from the model submitted for evaluation only in the elements of the scale that perform motion compensation, the size or capacity of the scale, and the software used by the scale. If other elements differ, a separate application must be completed.

Model Designation: Enter the model name or number that will be visible to the scale inspector and will allow him to clearly determine that the scale he is inspecting is on the list of approved scales.

Maximum capacity: Report in kilograms.

Value of scale divisions: Self explanatory.

Number of scale divisions: Report the maximum capacity divided by the value of scale divisions

Minimum Load: Report the smallest weight load that can be determined by the scale which is metrologically acceptable.

Accuracy Class: Scales are divided into two accuracy classes. See Appendix A, section 4.2.2

Block III. Information about the certifying laboratory: Information about the laboratory which performed the laboratory evaluation and type testing. The laboratory must be accredited by the government of the country in which tests were conducted.

Block IV. Certification of compliance: Self explanatory.

Block V. List of attachments:

- A. The information provided to NMFS must be sufficient to allow NMFS to judge whether the scale is appropriate for its intended use on a vessel at-sea. Requirements for motion compensation are specifically described in Appendix A, section 2.3.2.6.
- B. Each scale listed in Block II must be described.
- C. Test results must be attached which either:
 - 1. led to an OIML certificate of conformance.
 - 2. demonstrate that the scale meets all test requirements in Appendix A or the annex to Appendix A of 50 CFR 679.28. An NTEP certificate will be accepted only for the specific influence factor tests which were conducted to receive the NTEP certificate additional information must be submitted to verify compliance with the laboratory tests that are not performed under the NTEP.
- D. List of adjustments included in the audit trail.
- E. Other. This should include any supporting information that will assist NMFS in determining if the scale meets the performance and technical standards.

Block VI. General Requirements checklist: This checklist is provided for your own convenience and does not need to be submitted to NMFS. Each item on this list is required before a scale may be approved by NMFS. For each item on the checklist, there is a reference to a paragraph of Appendix A to 50 CFR 679.28 (attached). If the scale being evaluated meets that criterion, place a mark in the plus column. If a scale does not meet the criterion, or you are not certain whether it meets the criterion, place a mark in the minus column.

III. INFORMATION ABOUT THE CERTIFYING LABORATORY

Name of Laboratory:	Name and Address of Government Agency Accrediting Laboratory:
Mailing Address of Laboratory:	
Telephone: FAX:	

IV. CERTIFICATION OF COMPLIANCE WITH NMFS AT-SEA SCALE REQUIREMENTS

I certify that I have examined the scale or scale component described above and found it to be in compliance with the performance and technical requirements in 50 CFR 679 (§679.28(b)(2) and Appendix A) as indicated in the attached checklist and test report forms.

Signature of Manufacturer's Representative:

Date

Printed Name of Manufacturer Representative:

V. LIST OF ATTACHMENTS

- A. Written description and diagrams of the scale indicating primary features of the scale, how the scale operates, and how the scale compensates for vessel motion.
- B. Describe the difference between the scale submitted for laboratory evaluation and all other scales for which the laboratory evaluation will apply.
- C. Laboratory test results
- D. List of adjustments included in the audit trail
- E. Other (please list)

VI. GENERAL REQUIREMENTS CHECKLIST-BELT SCALE

Appendix A reference	Title	+	-	Remarks
2.3.1.1	Indicators and Printers: General			
2.3.1.2	Values Defined			
2.3.1.3	Units			
2.3.1.4	Value of the Scale Division			
2.3.1.5	Range of Indication			
2.3.1.6	Resettable and non-resettable values			
2.3.1.7	Rate of Flow Indicator			
2.3.1.8	Printed Information			
2.3.1.9	Permanence of Markings			
2.3.1.10	Power Loss			
2.3.1.11	Adjustable Components			
2.3.1.12	Audit Trail			Written description must be attached
2.3.2.1	Speed Measurement			
2.3.2.2	Conveyor Belt			
2.3.2.3	Overload Protection			
2.3.2.4	Speed Control			
2.3.2.5	Adjustable Components			
2.3.2.6	Motion Compensation			Written description must be attached
2.3.4	Marking			
2.3.4.1	Presentation			

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 190 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Sue Salvesson, Assistant Regional Administrator, Sustainable Fisheries Division, Alaska Region, NMFS, P.O. Box 21668, Juneau, AK 99802 (Attn: Lori Gravel).

ADDITIONAL INFORMATION: Before completing this form please note the following: 1) NMFS cannot conduct or sponsor this information request, and you are not required to respond to this information request, unless the form displays a currently valid OMB control number; 2) this information is being used to manage the At-Sea Scales Program; 3) Federal law and regulations require and authorize NMFS to manage commercial fishing effort; 4) Submission of this information is required for scales approved by NMFS to weigh catch at sea; 5) Responses to this information request are not confidential except as required under the Privacy Act.

INSTRUCTIONS

Application to be placed on NMFS' list of scales eligible for approval BELT SCALES

Block I. Information about the scale tested. Self explanatory

Block II. Information about all scales. More than one model of scale may be evaluated at the same time. However, the models may differ from the model submitted for evaluation only in the elements of the scale that perform motion compensation, the size or capacity of the scale, and the software used by the scale. If other elements differ, a separate application must be completed.

Model Designation: Enter the model name or number that will be visible to the scale inspector and will allow him to clearly determine that the scale he is inspecting is on the list of approved scales.

Value of Scale Divisions: Enter the smallest division displayed by the scale.

Maximum Flow Rate: Report in metric tons per hour or kilograms per hour.

Minimum Flow Rate: Report in metric tons per hour or kilograms per hour. This must not be greater than 35 percent of the maximum flow rate.

Minimum Totalized Load: Report in kilograms per hour.

Belt Speed: Report in meters per hour. This is the speed at which the belt travels when the scale is at its maximum flow rate.

Weigh Length: Enter either the length of the weighing plate or the distance between the two imaginary lines at the half distance between the axes of the end weighing rollers and the axes of the nearest carrying rollers. When there is only one weighing roller, the weigh length is equal to half the distance between the axes of the nearest carrying rollers on either side of the weighing roller.

Maximum capacity: Should be reported in kilograms.

Block III. Information about the certifying laboratory: Information about the laboratory which performed the laboratory evaluation and type testing. The laboratory must be accredited by the government of the country in which tests were conducted.

Block IV. Certification of compliance: Self explanatory.

Block V. List of attachments:

- A. The information provided to NMFS must be sufficient to allow NMFS to judge whether the scale is appropriate for its intended use on a vessel at-sea. Requirements for motion compensation are specifically described in Appendix A, section 2.3.2.6.
- B. Each scale listed in Block II must be described.
- C. Test results must be attached which either:
 1. led to an OIML certificate of conformance.
 2. demonstrate that the scale meets all test requirements in Appendix A or the annex to Appendix A of 50 CFR 679.28. An NTEP certificate will be accepted only for the specific influence factor tests which were conducted to receive the NTEP certificate additional information must be submitted to verify compliance with the laboratory tests that are not performed under the NTEP.
- D. List of adjustments included in the audit trail.
- E. Other. This should include any supporting information that will assist NMFS in determining if the scale meets the performance and technical standards.

Block VI. General Requirements checklist: This checklist is provided for your own convenience and does not need to be submitted to NMFS. Each item on this list is required before a scale may be approved by NMFS. For each item on the checklist, there is a reference to a paragraph of Appendix A to 50 CFR 679.28 (attached). If the scale being evaluated meets that criterion, place a mark in the plus column. If a scale does not meet the criterion, or you are not certain whether it meets the criterion, place a mark in the minus column.