

NOTICE OF OFFICE OF MANAGEMENT AND BUDGET ACTION

Date 08/01/2013

Department of Commerce
National Oceanic and Atmospheric Administration

FOR CERTIFYING OFFICIAL: Simon Szykman

FOR CLEARANCE OFFICER: Jennifer Jessup

In accordance with the Paperwork Reduction Act, OMB has taken action on your request received 07/25/2013

ACTION REQUESTED: No material or nonsubstantive change to a currently approved collection

TYPE OF REVIEW REQUESTED: Regular

ICR REFERENCE NUMBER: 201307-0648-012

AGENCY ICR TRACKING NUMBER:

TITLE: Permit and Reporting Requirements for Non-Commercial Fishing in the Rose Atoll, Marianas Trench and Pacific Remote Islands Marine National Monuments (MANM)

LIST OF INFORMATION COLLECTIONS: See next page

OMB ACTION: Approved without change

OMB CONTROL NUMBER: 0648-0664

The agency is required to display the OMB Control Number and inform respondents of its legal significance in accordance with 5 CFR 1320.5(b).

EXPIRATION DATE: 05/31/2016

DISCONTINUE DATE:

| BURDEN: | RESPONSES | HOURS | COSTS |
|---------------------------------|-----------|-------|-------|
| Previous | 140 | 44 | 129 |
| New | 140 | 44 | 129 |
| Difference | | | |
| Change due to New Statute | 0 | 0 | 0 |
| Change due to Agency Discretion | 0 | 0 | 0 |
| Change due to Agency Adjustment | 0 | 0 | 0 |
| Change due to PRA Violation | 0 | 0 | 0 |

TERMS OF CLEARANCE: Terms of the previous clearance remain in effect.

OMB Authorizing Official: Dominic J. Mancini
Acting Deputy Administrator,
Office Of Information And Regulatory Affairs

List of ICs

| IC Title | Form No. | Form Name | CFR Citation |
|---------------------|----------|--|--------------|
| Permit applications | NA | Marine National Monument Non-commercial fishing permit application | |
| Fishing log | NA, NA | Monument fishing log - clean, Monument Fishing Log | |

JUSTIFICATION FOR CHANGE

PERMIT AND REPORTING REQUIREMENTS FOR NON-COMMERCIAL FISHING IN THE ROSE ATOLL, MARIANAS TRENCH, AND PACIFIC REMOTE ISLANDS MARINE NATIONAL MONUMENTS

OMB CONTROL NO. 0648-0664

This is a request to make minor revisions to the Marine National Monument non-commercial fishing logbook.

Explanation of the Changes

The revisions are needed to provide respondents more precise instructions on how to complete the OMB-approved fishing logbook, and inform respondents of when and where to submit fishing logbook to NMFS. The addition of logbook series numbers will allow NMFS to better track each submitted fishing logsheets for administrative recordkeeping purposes.

There are no new requirements. These revisions do not result in a change to the approved burden estimates.

The requested revisions are described in text below, and are shown in track changes in the revised fishing logbook.

Page 1:

1. Add NOAA Logo
2. b. Remove the word "PACIFIC" in the title of the fishing log so it reads: "MARINE NATIONAL MONUMENT DAILY FISHING LOG"
3. Add Logbook Page Number Series
4. Add instructions on fishing logbook reporting obligation

Page 2:

1. Add the word "Logsheet #" in the upper right corner below the OMB number and expiration date where each logsheet may be sequentially numbered.
2. Remove the word "Pacific" in the title of the fishing log so it reads: "Marine National Monument – Daily Fishing Logsheet"
3. Correct the address where vessel operators must submit completed logbooks

Page 3:

1. Revise the title to read "Instructions for the Marine National Monument Daily Fishing Logsheet"
2. Revise Instruction #12 to read: "For each fishing method, enter the number of hours actively fished, that is, fishing gear deployed in the water."
3. Revise Instruction #16 to read: "If you lost any fish due to sharks, other predators, or other reasons, write in the number lost."
4. Add instructions on when and where to submit fishing logbooks

PAPERWORK REDUCTION ACT CHANGE WORKSHEET

| | | |
|--|---|------------------------------------|
| Agency/Subagency | OMB Control Number _____ - _____ | |
| <i>Enter only items that change</i> | | |
| | Current record | New record |
| Agency form number (s) | | |
| Annual reporting and recordkeeping hour burden | | |
| Number of respondents | | |
| Total annual responses | | |
| Percent of these responses collected electronically | % | % |
| Total annual hours | | |
| Difference | | |
| Explanation of difference | | |
| Program change | | |
| Adjustment | | |
| Annual reporting and recordkeeping cost burden (in thousands of dollars) | | |
| Total annualized Capital/Startup costs | | |
| Total annual costs (O&M) | | |
| Total annualized cost requested | | |
| Difference | | |
| Explanation of difference | | |
| Program change | | |
| Adjustment | | |
| Other changes** | | |
| Signature of Senior Official or designee: | Date: | For OIRA Use _____ _____ |

** This form cannot be used to extend an expiration date.



National Marine Fisheries Service – Pacific Islands Region

PACIFIC MARINE NATIONAL MONUMENT DAILY FISHING LOG

Name of Vessel _____

Permit Number _____

Logbook Page # Series _____

PAPERWORK REDUCTION ACT INFORMATION

Public reporting burden for this collection is estimated to average 20 minutes per response, including 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 aspects of this collection of information, including suggestions for reducing this burden, to Pacific Islands Regional Administrator, NOAA Fisheries Service, 1601 Kapiolani Blvd. Suite 1110, Honolulu, Hawaii 96814-4700.

This information is being collected to provide information needed by NMFS to regulate and monitor fishing activities in the monument area and to evaluate the effectiveness of management by assessing the status of stocks and the status of fisheries. The information will provide a basis for determining whether changes in management are needed to sustain the productivity of the stocks or to respond to interactions between fishing vessels and protected species. The information is also used to provide a basis for evaluating the magnitude and distribution of impacts resulting from changes to the regulations. Responses to the collection are required under 50 CFR 665.14. Proprietary data provided concerning the vessel and/or business of the responders are handled as confidential under the Magnuson-Stevens Fishery Conservation and Management Act (Sec. 402(b)), and NOAA Administrative Order 216-100. Notwithstanding any other provision of the law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.

VESSEL REPORTING OBLIGATION REQUIREMENTS

The operator of any fishing vessel subject to the requirements of the Code of Federal Regulations, Title 50, Section 665.14 must maintain onboard the vessel an accurate and complete record of catch, effort, and other data on logsheet forms provided by the Regional Administrator. All information specified on the logsheet must be recorded on the form within 24 hours after the completion of each fishing day. Each logsheet must be signed and dated by the fishing vessel operator. The original logsheet must be submitted to the National Marine Fisheries Service within 30 days of the end of each fishing trip. Submit daily fishing logsheet reports to: Pacific Islands Fisheries Science Center, 2570 Dole St., Honolulu, HI 96822-2396. For more information call (808) 983-2902.

Pacific Marine National Monument– Daily Fishing Logsheet

Pacific Islands Region, NOAA National Marine Fisheries Service

| | |
|--|-----------------------------------|
| 1. Operator: | |
| 2. Vessel: | 3. Vessel Official Number: |
| 4. Monument Permit Number: | |
| 5. Permit Type (Check one): <input type="checkbox"/> Recreational Charter <input type="checkbox"/> Non-commercial | |

| | | | |
|--------------------------------------|---|-----------------------------------|-----------------------------------|
| 6. Monument Area (Check one): | | | |
| <input type="checkbox"/> Rose Atoll | <input type="checkbox"/> Uracus (Farallon de Pajaros) | <input type="checkbox"/> Maug | <input type="checkbox"/> Asuncion |
| <input type="checkbox"/> Howland | <input type="checkbox"/> Baker | <input type="checkbox"/> Jarvis | <input type="checkbox"/> Kingman |
| <input type="checkbox"/> Palmyra | <input type="checkbox"/> Wake | <input type="checkbox"/> Johnston | |

7. Date of Fishing:

8. Location: Lat.: _____ ° _____ ' N/S (circle one) ; **Lon.:** _____ ° _____ ' E/W (circle one)

| | |
|---------------------------|------------------------|
| 9. Departure Date: | Departure Port: |
|---------------------------|------------------------|

| | |
|-------------------------|---------------------|
| 10. Return Date: | Return Port: |
|-------------------------|---------------------|

| FISHING EFFORT | | | SPECIES CAUGHT | FISH KEPT (RETAINED) | | FISH RELEASED | | FISH LOST |
|----------------|--------------|------------------------------------|----------------|----------------------|-------------------------------------|---------------|------|-----------|
| 11. | 12. | 13. | 14. | | | 15. | | 16. |
| Fishing method | Hours fished | Number of poles, lines, hooks used | Species name | Number of fish kept | Estimated total weight of fish kept | Alive | Dead | Lost |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
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| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

| 17. Protected Species | Species Name | Number Not Injured | Number Injured | Number Dead |
|-----------------------|--------------|--------------------|----------------|-------------|
| Marine Mammals | | | | |
| Sea Turtles | | | | |
| Sea Birds | | | | |

I certify that the above information is complete and true to the best of my knowledge:

18. Vessel Operator Signature: _____ **Date:** _____

Please Submit to: NMFS Pacific Islands Fisheries Science Center, ~~ATTN: FMSP~~, 2570 Dole St. Honolulu, HI 96822-2396

Instructions for the Marine National Monument ~~Non-Commercial~~ Daily Fishing Logsheet

1. Write in the full name (first, middle initial, and last) of the vessel operator (captain) who is preparing and submitting the report.
2. Write in the vessel name.
3. Write in either the U.S. Coast Guard documentation number, or state/territorial agency vessel registration number.
4. Write in the operator's permit number.
5. Indicate type of permit.
6. Identify the Monument area fished. Submit a separate report for each island area fished.
7. Write in the date which fishing activities covered by this report took place.
8. Write in the latitude and longitude of the fishing area. Use degree ° and minute ' ; circle N for north or S for south latitude; circle E for east and W for west longitude.
9. Write in the date and port vessel departed.
10. Write in the date and port vessel returned.
11. Identify the fishing method used.
12. For each fishing method, enter the number of hours actively fished, that is, fishing gear deployed in the water.
13. Enter the number of poles, lines/line haulers, and or hooks used, if appropriate.
14. For each fishing method, enter the type (species) of fish caught (one per row), the number of fish caught and the estimated total weight caught of that species.
15. If you released any fish you caught, identify the species and write in the number you released alive or dead.
16. If you lost any fish ~~of this species~~ due to sharks, other predators, or other reasons, write in the number lost.
17. Enter the type of each protected species you released uninjured, injured or dead.
18. Sign and date the daily log and return it to the address shown.

- The vessel operator must record ALL catch and effort information on the logsheet forms provided in the logbook within 24 hours of completing the daily fishing activities.
- The vessel operator must submit completed daily fishing logsheets to the National Marine Fisheries Service within 30 days following the return to port after each trip.

Please submit logsheets to: NMFS, Pacific Islands Fisheries Science Center
2570 Dole Street
Honolulu, Hawaii 96822-2396

For further information, call: Phone: (808) 983-2902