PORT ENTRY PRIOR NOTIFICATION FORM

Information to be provided in advance by vessels requesting port entry

1 Intended port of call	
2 Port State	
3 Estimated date and time of arrival	_____/_____/_____ _____H_____mn
4 Purpose(s)	
5 Port and date of last port call	_____/_____/_____

6 Name of the vessel		7 Flag State	
8 Type of vessel		9 IRCS	
10 Vessel contact information			
11 Vessel owner(s)			

12 Certificate of registry ID		13 IMO ID	
14 External ID		15 ICCAT ID	
16 VMS	□ No □ Yes	Type:	
17 Vessel dimensions	Length	Beam	Draft
18 Vessel master name and nationality			

19 Relevant fishing authorization(s)

Identifier	Issued by	Validity	Fishing area(s)	Species	Gear

20 Relevant transshipment authorization(s)

Identifier	Issued by	Validity

21 Transshipment information concerning donor vessels

Date	Location	Name	Flag State	ID number	Species	Product form	Catch area	Quantity

22 Total catch onboard				23 Catch to be landed / transshipped
Species	Product form	Catch area	Quantity (kg)	Quantity (kg)