**NWIFCA CATEGORY TWO POTTING PERMIT LANDINGS AND EFFORT RETURN FORM**

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| **Vessel Name:** |  |
| **Permit number:** |  |
| **Month:** |  |
| **Port of Landing** |  |

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| --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Area** | **No. of Pots**  | **Soak Time****Hrs** | **Bait Used** | **Species (Kg)** |  |
| **Set -total in water** | **Hauled** | **Brown Crab** | **Lobster** | **Whelk** | **Nephrops** | **Other** | **Comments** |
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| --- | --- | --- | --- | --- | --- |
| **Signature:** |  | **Print Name:** |  | **Date:** |  |
| **By signing this document you are confirming you have read the Data Protection statement with the guidance document and that the information contained within the document is correct to the best of the permit holders knowledge** |