Harvest Vessel Monitoring Record Form for Scombrotoxin control from Troll Operation (all fish landed live) Vessel Name:_____ Captain Signature: Trip start date: BLED BRINE* ICE Identify Storage condition (circle): **BLAST FROZEN*** BRINE FROZEN* Daily Storage Check (date/time/Initial) for Time **First** fish in Fish was placed in frozen fishing interval or ice storage (<6 hrs) Initials of all fish in hold completely and continuously Fishing Day landed Y or N surrounded by ice recorder Instructions: Fish are to be placed into chilling medium within 30 min or as soon as possible. Segregate all fish not placed in frozen or ice storage within 6 h to avoid having entire load rejected for histamine. Fish not stored frozen should be checked in morning and evening (about 12 hr intervals) for complete and continuous surrounding by ice. Record time storage is checked. *Fish placed into frozen storage within a 6 hr time interval do not need to have Daily Storage Checks. Additional Comment on problems (include day): Vessel Record Received by: initial _____ Date: _____ Time: ____ Vessel Record Acceptable and Critical Limits Met: Yes No Comment:

Record Review and Verification: Name: ______Date: _____