

Other Important Economic Information (Survey #: «Survey»):

12. Vessel insurance in 2010 (check all that apply): None Hull P&I

If Hull insured, enter coverage level if vessel is lost: \$ __, __ __, __ __.00
(do not enter monthly or annual insurance premium here, instead → Question 8.)

13. Appraised value of this vessel (if insured) or best estimate of this value (if not insured):

a) Market value of vessel including permits (anytime in 2010): \$ __, __ __, __ __.00

b) Market value of vessel without permits (anytime in 2010): \$ __, __ __, __ __.00

c) Original purchase price of vessel: \$ __, __ __, __ __.00
(estimate original value if gift or self-built)

14. Did you have any loan(s) on your vessel at any time during 2010: Yes No

If Yes: a) Total amount you still owe at *end of* 2010: \$ __, __ __, __ __.00

b) Please split total loan *payments* in 2010 (Question 9.) into:

i) Interest paid in 2010: \$ __, __ __, __ __.00

ii) Principal repaid in 2010: \$ __, __ __, __ __.00

15. Depreciation of vessel as claimed for tax purposes (2010): \$ __, __ __, __ __.00

16. During 2010 this vessel received revenue from (check all that apply):

- Shrimp Fishery Other Commercial Fisheries None / Not Active
 BP Oil Spill-related (any) Other Non-Fishing Income Activities

17. Total **BP Oil Spill-related** gross revenue received by this vessel in 2010: \$ __, __ __, __ __.00

18. Total gross revenue received by this vessel in 2010 from

a. **commercial fishing other than shrimp** AND

b. **non-fishing income** activities **other than** BP Oil Spill-related: \$ __, __ __, __ __.00

19. Government payments received for this vessel in 2010; for example due to imports and low shrimp prices (tariff money; trade assistance adjustment payments) or hurricanes/disaster relief: \$ __, __ __, __ __.00

(if none enter "0")

I certify that the information contained on this form is accurate and complete to the best of my knowledge:

Signature of person completing report

Date

Printed name of person signing report

(_____)_____
Phone number

Thank You! Please return this completed form in the enclosed prepaid envelope!

[Mail to: NMFS; Miami Lab; P.O. Box 491500; Key Biscayne, FL 33149]

Other Questions (voluntary)

1. Would you like to receive the results (2010 fact sheet) when they become available? Yes No

2. Please use the reverse side or a separate piece of paper for any comments. We appreciate any comments.