To ensure contracted observers maintain a high level of professionalism, observer placement and debriefing procedures continue to be improved. Vessel operators can further assist by reporting on unsatisfactory behaviour or favourable impression of observers they host.

Operators are especially encouraged to report on suspected severe wrongdoing as soon as possible after returning an observer to port, so that a timely investigation can be made.

Please use the reverse-side form to fax such report to the fishery authority that placed the observer.
# VESSEL REPORT ON OBSERVER

**Attention:** Director and Observer Manager

**Fishing Authority:** ________________

**Fax No.:** ____________________  **Date:** __________

**No. of pages:** __________

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**From:**

____________________________

**Vessel:** ____________________

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**Vessel Captain:**

____________________________

**(or company rep.)** ____________________

**Vessel licence No.:** ____________________

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**Nature of report:**

1. Suspected observer wrongdoing needing immediate investigation ..

2. General dissatisfaction with observer behavior on board .............

3. Favourable impression of observer ...............................

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Please tick the appropriate box

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**Observer name**

____________________________

**Date observer got on vessel:** __________

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**Date, time and place of incident or behaviour:**

____________________________

**Date observer left vessel:** __________

---

**Brief description of incident or behaviour:**

____________________________

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**Names of crew, officers or others affected by incident or observer behaviour:**

____________________________

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**Contact name (if further information is required):**

____________________________

**Phone number:** __________

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**Further information (please continue on another sheet if necessary):**

____________________________

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(office use only)

**Observer Trip ID No.:** ____________________

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**Signed:** ____________________  **Date:** __________

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Captain (or company representative)  ____________________