



SOUTH WALES SEA FISHERIES COMMITTEE

LOBSTER TAG RETURN FORM

Date.....

Vessel name/number

Skipper.....

Tag number SWSFC

Position caught (Lat/long or position from landmark).....

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Carapace Length (mm).....

Sex: Male/Female

Berried: Yes/No

Claws missing: None/One/Both

Bait Used/Pot Type.....

Lobster: landed/discarded

Position if returned to sea (Lat/long or position from landmark).....

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General comments.....

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Please send complete forms to:
Dr Leanne Llewellyn
SWSFC
Riverside Centre
Pipehouse Wharf
Morfa Road
Swansea
SA1 2EN