



Cefas

Please complete and print this form and send it with the tag to:
Fish Tag Returns
Cefas Lowestoft Laboratory,
Pakefield Road, Lowestoft
Suffolk, NR33 0HT, UK

Fish tag return form

Name:

Address:

Telephone number:

Email:

Tag number(s):

Species:

Date caught:

Port of landing:

Where caught (Lat, Long, or fishing ground):

Vessel name/registration (if applicable):

How caught:

Nose to tail length:

Wing width (rays only):

Weight:

Presentation when weighed (gutted, entire, etc):

Condition of fish:

Condition of wound:

Additional information: