



**PRINCE EDWARD ISLAND DEPARTMENT
OF
FISHERIES, AQUACULTURE & RURAL DEVELOPMENT**

**SHELLFISH PROCESSORS
MONTHLY STATEMENT**

PROCESSOR'S NAME: _____

MAILING ADDRESS: _____

POSTAL CODE: _____

PLANT LOCATION: _____

TELEPHONE NUMBER: _____

FAX NUMBER: _____

FOR PERIOD STARTING: _____ 20__ TO: _____ 20__

**PLEASE RETURN THE COMPLETED MONTHLY STATEMENT FORMS TO THE
P.E.I. DEPARTMENT OF FISHERIES, AQUACULTURE & RURAL DEVELOPMENT,
P.O. BOX 2000, CHARLOTTETOWN, P.E.I. CIA 7N8**

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SHELLFISH PROCESSORS MONTHLY STATEMENT

Indicate (x) products processed during the period and the applicable information.

PRODUCT	SIZE/GRADE	NUMBER OF CASE/BOXES	NUMBER OF POUNDS/KILOS
LOBSTER:			
Live/Fresh	() Markets		
Live/Fresh	() Cannery		
Other _____	() _____		
Other _____	() _____		
Other _____	() _____		
SOFT SHELL CLAMS			
Live/Fresh	() _____		
Other _____	() _____		
Other _____	() _____		
QUAHAUGS			
Live/Fresh	() Little Neck (Sm)		
Live/Fresh	() Cherrystone (Med)		
Live/Fresh	() Chowders (lg)		
Other _____	() _____		
Other _____	() _____		
Other _____	() _____		
OYSTERS			
Choice	() Large		
	() 100 c		
	() 225 c		
	() 400 c		
Other	() _____		
Choice	() Small		
	() 100 c		
	() 225 c		
	() 400 c		
Other	() _____		

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PRODUCT	SIZE/GRADE	NUMBER OF CASE/BOXES	NUMBER OF POUNDS/KILOS
OYSTERS (cont'd)			
Standard	() 100 c		
	() 225 c		
	() 400 c		
Other	() _____		
Commercial	() 100 c		
	() 225 c		
	() 400 c		
Other	() _____		
Other _____	() _____		
Other _____	() _____		
MUSSELS			
Live/Fresh	() 10 lb.		
	() 25 lb.		
	() 2x25		
Other _____	() _____		
Other _____	() _____		

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE AND FULLY DISCLOSES ALL RECORDS OF FISH PROCESSED IN THE STATED PERIOD.

DATE: _____ NAME: (Please Print) _____

SIGNATURE: _____

This information is being collected pursuant to Section 5(e) of the Fisheries Act and will be used only for those purposes. Please contact the Department FOIPP Coordinator at 368-5790 if you have any questions regarding the collection or use of the information as per Section 32(2) of the Freedom of Information and Protection of Privacy Act.

PLEASE RETURN THE COMPLETED STATEMENT FORM TO THE P.E.I. DEPARTMENT OF FISHERIES AND AQUACULTURE. BOX 2000, CHARLOTTETOWN, P.E.I., C1A 7N8. IT IS ILLEGAL TO PROCESS OR ATTEMPT TO PROCESS ANY FISH UNLESS UNDER A VALID FISH PROCESSORS LICENSE.