

TRANSPLANT/RELAY LOG FOR: \_\_\_\_\_

**TRANSPLANT /RELAY FROM A CONDITIONAL AREA WHEN IN THE "CLOSED" STATUS IS NOT ALLOWED**

<b>Date</b>							
<b>Boat:</b>							
<b>Captain:</b>							
Call or FAX DEP							
<b>FROM: Harvest Area/Bed#:</b>							
<b>Classification:</b>	<b>R, CR, P</b>	<b>R, CR, P</b>	<b>R, CR, P</b>	<b>R, CR, P</b>	<b>R, CR, P</b>	<b>R, CR, P</b>	<b>R, CR, P</b>
<b>If Conditional - Status:</b>	Open _____ Closed _____	Open _____ Closed _____	Open _____ Closed _____	Open _____ Closed _____	Open _____ Closed _____	Open _____ Closed _____	Open _____ Closed _____
<b>Start-End Time</b>	_____ - _____	_____ - _____	_____ - _____	_____ - _____	_____ - _____	_____ - _____	_____ - _____
<b>Species: (Circle)</b>	<b>Hard Clams, Mussels, Oysters, Scallops</b>	<b>Hard Clams, Mussels, Oysters, Scallops</b>	<b>Hard Clams, Mussels, Oysters, Scallops</b>	<b>Hard Clams, Mussels, Oysters, Scallops</b>	<b>Hard Clams, Mussels, Oysters, Scallops</b>	<b>Hard Clams, Mussels, Oysters, Scallops</b>	<b>Hard Clams, Mussels, Oysters, Scallops</b>
<b>Quantity (Specify #bags, containers, or bulk)</b>							
<b>Vehicle for land transport, if authorized.</b>							
<b>TO: Transplant/ Relay Bed #:</b>	_____	_____	_____	_____	_____	_____	_____
<b>Time Start/ end</b>	_____ - _____ start end	_____ - _____ start end	_____ - _____ start end	_____ - _____ start end	_____ - _____ start end	_____ - _____ start end	_____ - _____ start end
<b>Relay Time: Short Term: S Long Term: L</b>	<b>S or L</b>	<b>S or L</b>	<b>S or L</b>	<b>S or L</b>	<b>S or L</b>	<b>S or L</b>	<b>S or L</b>
Water Temperature							
<b>Grounds Buoyed</b>							
<b>Comments or date when Transplant Lic is voided</b>							
<b>Initial Daily</b>							

Items in bold type must have entries. Classifications: Restricted = R, Conditionally Restricted= CR, Prohibited = P.

Note: Harvesting out of Conditional areas in the CLOSED status is not allowed by your license.

Weekly Review by \_\_\_\_\_ on \_\_\_\_\_  
Signature of HACCP Trained Individual Date