



State of Alaska
Department of Fish and Game
Division of Sport Fish

Nomination Form
Anadromous Waters Catalog

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Region Westward USGS Quad(s) Kaguyak D-5 and Kodiak A-5
 Anadromous Waters Catalog Number of Waterway 258-55-10050

Name of Waterway Kiavak spit USGS Name Local Name
 Addition Deletion Correction Backup Information

For Office Use

| | | |
|--|-----------------------|----------------|
| Nomination # <u>C9-491</u> | _____ | _____ |
| Revision Year: <u>2010</u> | Fisheries Scientist | Date |
| Revision to: Atlas _____ Catalog _____ | | Date |
| Both _____ | | <u>4/28/09</u> |
| Revision Code: <u>F-1</u> | AWC Project Biologist | Date |
| | _____ | _____ |
| | Cartographer | Date |

OBSERVATION INFORMATION

| Species | Date(s) Observed | Spawning | Rearing | Present | Anadromous |
|-------------|----------------------------|----------|---------|---------|-------------------------------------|
| coho salmon | 90 | y | y | yes | <input checked="" type="checkbox"/> |
| chum salmon | 77,81,83,89,92 | y | y | yes | <input checked="" type="checkbox"/> |
| pink salmon | 69,70,75-77,83,86,89,91,92 | y | y | yes | <input checked="" type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |

IMPORTANT: Provide all supporting documentation that this water body is important for the spawning, rearing or migration of anadromous fish, including: number of fish and life stages observed; sampling methods, sampling duration and area sampled; copies of field notes; etc. **Attach a copy of a map showing location of mouth and observed upper extent of each species,** as well as other information such as: specific stream reaches observed as spawning or rearing habitat; locations, types, and heights of any barriers; etc.

Aerial surveys have been conducted on this system since the **1970's** and observers have noted the presence of **pink, chum and coho salmon**, which has been published in our ADF&G Annual Salmon Management Reports (AMR). Data can be found in RBASE.
Please add coho and chum salmon.

Name of Observer (please print): on file; name and date is published in AMR
 Signature: _____ Date: _____
 Agency: Alaska Department of Fish & Game
 Address: 211 Mission Road
Kodiak, Alaska 99615

This certifies that in my best professional judgment and belief the above information is evidence that this waterbody should be included in or deleted from the Anadromous Waters Catalog.
 Signature of Area Biologist: _____ Date: _____ Revision 02/08
 Name of Area Biologist (please print): Jeff Wadle, FBIII

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KODIAK A-5

KAGUYAK D-5

258-55-10050

Ps Dvp

