

ANNEX H

REMAIN IN PORT REQUEST – VESSELS/TUGS & BARGES OVER 500GT

Authority: Title 33 United States Code (U.S.C.) § 471, Title 33 U.S.C. § 1221 and Title 50 U.S.C. § 191

Instructions:

Please fill out all applicable sections. Any section not applicable, mark "N/A". Failure to fully complete the request may result in a delay in review or result in request being denied. Once completed, please forward request to Sector Jacksonville by email. Please call Sector Jacksonville's Domestic Vessel Branch at (904) 714-7500 to ensure request was received. Completion of this form will assist the Captain of the Port (COTP) in making the determination that the vessel can remain in port.

Email Address: jaxdomestic@uscg.mil

1. Vessel Name: _____ Flag: _____
Call Sign: _____ Official # : _____
Barge Name (s): _____ Flag: _____
Official #(s) : _____
2. Nationality of the Vessel: _____
3. Name of Master: _____
4. Name of Agent: _____ Phone #: _____
Address of Agent: _____

5. Name of Charter/Operator: _____ Phone#: _____
Address of Charter/Operator: _____

6. Name of Owner: _____ Phone#: _____
Address of Owner: _____

7. Vessel -- Length: _____ Gross Tonnage _____
Barge - Length: _____ Gross Tonnage _____
8. Reason why the vessel cannot leave port: _____

9. Condition of Vessel or barges (loaded-type of cargo/ballast/etc):

10. Number of personnel to remain on the vessel and their qualifications: _____

11. Amount of ballast the vessel may hold: _____

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12. Amount of bunkers, lube oil, and diesel oil on board: _____

13. Have you contacted your Oil Spill Response Organization? (YES or NO) _____

14. Estimated draft with the vessel/barge ballasted:

15. Name of Berth: _____ Location: _____

16. Depth of Water in the vessel's berth at low tide: _____

17. Availability of vessel's main propulsion: _____

18. Describe how the vessel will be secured to the berth. Submit a diagram showing the mooring arrangements with the size of mooring lines or wire _____

19. Operational status of machinery on board (i.e. engines, generators, fire fighting pumps, bilge pumps, anchors and number of anchors, etc.) _____

20. Fire fighting capabilities of the vessel: _____

21. Any unusual conditions affecting the vessel's seaworthiness: _____

NOTE: If a 3rd party assist tug or tugs will be used alongside the subject vessel or barge during heavy weather, attach written agreement between the two parties, along with the towing vessel particulars. Any assist tug utilized must be of sufficient size and power to assist during an emergency.

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FACILITY PARTICULARS

1. Fendering configuration and condition: (provide diagram and description of available fendering)

2. Has an engineering study been performed to determine the maximum size vessel that could safely be moored at the facility during severe weather, with maximum sustained wind speeds indicated? (YES or NO) _____
If yes, what year was study done? _____

3. Condition of bollards, dolphins, and deadmen. Are they capable of holding vessel?

4. Shoreside firefighting capabilities? (Briefly describe resources facility has available.)

5. Tugboat assistance available? Have arrangements been made with a tow company? (YES or NO) _____
If yes, what is company name? _____

6. Distance from berth to closest obstruction that may cause damage to vessel (i.e. cranes, drydocks, buildings, tanks, etc.) _____

7. Distance to nearest oil storage facility, hazardous material facility, oil or hazardous material storage tanks at facility where vessel will be moored, and any oil pipelines).

NOTE: Facility operators should ensure the open areas of their docks, wharves, and piers are cleared of all missile hazards: Hazardous materials should be removed from areas prone to flooding. Drums should be banded on pallets not more than two tiers high or laid horizontally with secure dunnage.

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CONTINGENCY INFORMATION

1. Plans for emergency evacuation of crewmen. (If necessary)

2. Plans for emergency medical services.

3. Plans to contain and remove oil discharges or hazardous material releases into the environment.

Discrepancies:

VESSEL REPRESENTATIVE

Name (print) _____ Signature _____

Phone #: _____

Date: _____ Time: _____

FACILITY REPRESENTATIVE

Name (print) _____ Signature _____

Phone #: _____

Date: _____ Time: _____

Signatures above acknowledge that both Vessel and Facility representatives have reviewed, discussed and agreed to the accuracy of information contained in pages H1-H4 of Annex H, as well as any attachments to this request.