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| Part 1 to be completed by the requesting agent – return to [Southwalesradio@abports.co.uk](mailto:Southwalesradio@abports.co.uk) | |
| Date of intended passage: 18/07/2018 | Agent Making Booking: |
| Agency: | Contact Number: |
| Type of Towage Operation (Please Tick) | Dead Ship Barge  Unusual Object |
| Towage From: | To: |
| **Details of the Tow** |  |
| Name: | LOA:      m Breadth:      m Draft:      m |
| Brief Description of Tow: | |
| Is the Tow Manned? Yes  No  Are safe boarding arrangements available on each pilot requiring a tow? Yes  No | |
| What functioning propulsion/steerage does the tow have?  Propeller(s)  Thruster(s)  Rudder(s)  None | |
| **Lead Tug Details** | |
| Name: | LOA:      m Draft:      m |
| Power:      KW | Bollard Pull:      t |
| Towing Arrangement: | |
| **Other Tug Details** | |
| Name: | LOA:      m Draft:      m |
| Power:      KW | Bollard Pull:      t |
| Towing Arrangement: | |
| **Nominated person with overall responsibility for the manoeuvre** | |
| Name: | Position: |
| Organisation / Vessel: | Contact Number: |

Please include the following attachments:

* Risk Assessment
* Method Statement

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| Part 2 To be completed by Harbour Authority | |
| **Pilotage** |  |
| Number of Pilots Required: Choose an item. |  |
| Boarding at: | Disembarking at: |
| Have pilot boarding arrangements been verified? Yes  No | |
| If no give details: | |
| Is additional towage required: Yes  No | Details: |
| If required where required from: | To: |
| **Harbour Authority Review** |  |
| Passage Plan limitations: | |
| Passage Plan Agreed:  Risk Assessment / Method Statement sighted & agreed: | |
| **Outcome** | |
| Approved:  Additional Action Required: | Action Required: |
| Reviewed by: | Position: |
| Signature: | |
| Date / Stamp: | |