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| Part 1 to be completed by the requesting agent – return to 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:       |