

Integrated Management System Formats Manual

BALLAST WATER REPORTING FORM As per IMO Resolution A.868 (20) (TO BE PROVIDED TO PORT STATE AUTHORITY UPON REQUEST)

1. VESSEL INFORMATION
2. BALLAST WATER

Vessel Name:	Type:	IMO Number:	Specify Units: m ³ , MT, LT, ST
Owner:	GT:	Call Sign:	Total Ballast Water on Board:
Flag:	Arrival Date:	Agent:	
Last Port and Country:		Arrival Port:	Total Ballast Water Capacity:
Next Port and Country:			

3. BALLAST WATER TANKS BALLAST WATER MANAGEMENT PLAN ON BOARD? YES _____ NO _____ HAS THIS BEEN IMPLEMENTED?

TOTAL NO. OF TANKS ON BOARD _____ NO. OF TANKS IN BALLAST _____ IF NONE IN BALLAST GO TO NO. 5 YES _____ NO _____

NO. OF TANKS EXCHANGED _____ NO. OF TANKS NOT EXCHANGED _____

4. BALLAST WATER HISTORY: RECORD ALL TANKS THAT WILL BE DEBALLASTED IN PORT STATE OF ARRIVAL; IF NONE GO TO NO. 5

Tanks/Holds (list multiple sources/tanks separately)	BW SOURCE				BW EXCHANGE : circle one: Empty/Refill or Flow Through					BW DISCHARGE			
	DATE ddmmyy	PORT or LAT. LONG	VOLUME (units)	TEMP (units)	DATE ddmmyy	ENDPOINT LAT. LONG.	VOLUME (units)	% Exch.	SEA Hgt. (m)	DATE ddmmyy	PORT or LAT. LONG.	VOLUME (units)	SALINITY (units)

Ballast Water Tank Codes: Forepeak=FP, Aftpeak=AP, Double Bottom=DB, Wing=WT, Topside=TS, Cargo Hold=CH, O=Other

IF EXCHANGES WERE NOT CONDUCTED, STATE OTHER CONTROL ACTION(S) TAKEN: _____

IF NONE, STATE REASON WHY NOT: _____

5. IMO BALLAST WATER GUIDELINES ON BOARD (RES. 868(20))? YES _____ NO _____

RESPONSIBLE OFFICER'S NAME AND TITLE (PRINTED) AND SIGNATURE: _____