## ANNEX

## REVISED CONSOLIDATED FORMAT FOR REPORTING ALLEGED INADEQUACIES OF PORT RECEPTION FACILITIES[1]

The Master of a ship having encountered difficulties in discharging waste to reception facilities should forward the information below, together with any supporting documentation, to the Administration of the flag State and, if possible, to the competent Authorities in the port State. The flag State shall notify the IMO and the port State of the occurrence.  The port State should consider the report and respond appropriately informing IMO and the reporting flag State of the outcome of its investigation.


**1      SHIP'S PARTICULARS**

1.1     Name of ship:                           _____

1.2     Owner or operator:                   _____

1.3     Distinctive number or letters:    _____

1.4     IMO Number[2]:                          _____

1.5     Gross tonnage:                          _____

1.6     Port of registry:                         _____

1.7     Flag State[3]:                               _____

1.8     Type of ship:

        ☐ Oil tanker                ☐ Chemical tanker            ☐ Bulk carrier

        ☐ Other cargo ship      ☐ Passenger ship              ☐ Other (specify) _____


**2      PORT PARTICULARS**

2.1     Country:                                    _____

2.2     Name of port or area:                _____

2.3     Location/terminal name:            _____
        (e.g. berth/terminal/jetty)

2.4     Name of company operating
        the reception facility (if applicable):    _____

2.5     Type of port operation:

        ☐ Unloading port        ☐ Loading port         ☐ Shipyard

        ☐ Other (specify)                     _____

2.6     Date of arrival:          __/__/____ (dd/mm/yyyy)

2.7     Date of occurrence:    __/__/____ (dd/mm/yyyy)

2.8     Date of departure:      __/__/____ (dd/mm/yyyy)

---

[1]     This format was approved by the fifty-third session of the Marine Environment Protection Committee in July 2005.

[2]     In accordance with the IMO ship identification number scheme adopted by the Organization by Assembly resolution A.600(15).

[3]     The name of the State whose flag the ship is entitled to fly.

## 3 INADEQUACY OF FACILITIES

3.1 Type and amount of waste for which the port reception facility was inadequate and nature of problems encountered

| Type of waste | Amount for discharge (m³) | Amount **not** accepted (m³) | **Problems encountered** Indicate the problems encountered by using one or more of the following code letters, as appropriate. A  No facility available B  Undue delay C  Use of facility technically not possible D  Inconvenient location E  Vessel had to shift berth involving delay/cost F  Unreasonable charges for use of facilities G  Other (please specify in paragraph 3.2) |
|---|---|---|---|
| **MARPOL Annex I-related** Type of oily waste: | | | |
| Oily bilge water | | | |
| Oily residues (sludge) | | | |
| Oily tank washings (slops) | | | |
| Dirty ballast water | | | |
| Scale and sludge from tank cleaning | | | |
| Other (please specify ………………..) | | | |
| **MARPOL Annex II-related** Category of NLS[4] residue/water mixture for discharge to facility from tank washings: | | | |
| Category X substance | | | |
| Category Y substance | | | |
| Category Z substance | | | |
| **MARPOL Annex IV-related** Sewage | | | |
| **MARPOL Annex V-related** Type of garbage: | | | |
| Plastic | | | |
| Floating dunnage, lining, or packing materials | | | |
| Ground paper products, rags, glass, metal, bottles, crockery, etc. | | | |
| Cargo residues, paper products, rags, glass, metal, bottles, crockery, etc. | | | |
| Food waste | | | |
| Incinerator, ash | | | |
| Other (please specify ………………..) | | | |
| **MARPOL Annex VI-related** | | | |
| Ozone-depleting substances and equipment containing such substances | | | |
| Exhaust gas-cleaning residues | | | |

---

[4]  Indicate, in paragraph 3.2, the proper shipping name of the NLS involved and whether the substance is designated as 'solidifying' or 'high viscosity' as per MARPOL Annex II regulation 1 paragraphs 15.1 and 17.1 respectively.

3.2     Additional information with regard to the problems identified in the above table.

_____
_____
_____
_____
_____


3.3     Did you discuss these problems or report them to the port reception facility?

☐ Yes            ☐ No


If Yes, with whom (please specify)

_____
_____


If Yes, what was the response of the port reception facility to your concerns?

_____
_____


3.4     Did you give prior notification (in accordance with relevant port requirements) about the vessel's requirements for reception facilities?

☐ Yes            ☐ No           ☐ Not applicable


If Yes, did you receive confirmation on the availability of reception facilities on arrival?

☐ Yes            ☐ No


**4       ADDITIONAL REMARKS/COMMENTS**

_____
_____
_____
_____


_____
    Master's signature                                          Date: __/__/____ (dd/mm/yyyy)


_____