

FINOLEX TERMINAL, RATNAGIRI



PORT RECEPTION FACILITY

APPENDIX 1

STANDARD FORMAT OF THE ADVANCE NOTIFICATION FORM FOR WASTE DELIVERY TO PORT RECEPTION FACILITIES

1. SHIP PARTICULARS :

1.1 Name of Ship :	1.5 Owner or operator :
1.2 IMO Number :	1.6 Distinctive number or letters :
1.3 Gross Tonnage :	1.7 Flag state
1.4 Type of ship :	Oil Tanker Chemical Tanker Bulk carrier Container Other cargo ship Passenger ship Ro-ro Other (specify)

2. PORT AND VOYAGE PARTICULARS :

2.1	Location / Terminal Name	2.6	Last port where waste was delivered
2.2	Arrival date and Time	2.7	Date of last delivery
2.3	Departure date and Time	2.8	Next port of delivery (if known)
2.4	Last Port and country	2.9	Person submitting this form (if other than the master)
2.5	Next port and country (if Known)		

3. TYPE & AMOUNT OF WAST FOR DISCHARGE TO FACILITY :

MARPOL Annex I-Oil	Quantity (m3)	MARPOL Annex V-Garbage	Quantity (m3)
Oily bilge water	NA	a. Plastic	
Oily residues (Sludge)		b. Food wastes	
Oily tank washings	NA	c. Domestic wastes (e.g. paper products, rags, glass, metal, bottle, crockery etc.)	
Dirty ballast water	NA	d. Cooking oil	
Scale and Sludge from tank cleaning	NA	e. Incinerator ashes	NA
Other (Please specify)	Quantity (m3)	f. Operational wastes	
MARPOL Annex II-NLS		g. Cargo residues	NA
Category X Substance	NA	h. Animal carcass(es)	
Category Y Substance	NA	i. Fishing gear	
		J. e-Waste	
Category Z Substance	NA	MARPOL Annex VI – related	Quantity (m3)
OS – Other Substance	NA	Ozone-depleting substances and equipment containing such substances	NA
MARPOL Annex IV-Sewage	Quantity (m3)	Exhaust gas-cleaning residues	NA

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Name of ship:	IMO Number:
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Please state below the approximate amount of waste and residues remaining on board and the percentage of maximum storage capacity.

Type	Waste to be delivered	Max Storage	Waste to be retained on board / % of max storage	Port where remaining waste will be delivered	Estimated waste between notification and next port	Last port & date where ship generated waste delivered	Delivering		✓
							All	Some None	
Food Waste m3									
Plastic m3									
General Domestic m3									
Oil soaked cotton rags & oily sludge m3									
Other Oils (Specify) m3									
Sewage m3									
Wood									
E-waste									
Lead acid batteries									
Medical waste									

Date: _____ Name and Position: _____

Time: _____ Signature: _____

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PORT RECEPTION FACILITY APPENDIX 2 FORMAT FOR THE WASTE DELIVERY RECEIPT

1. RECEPTION FACILITY AND PORT PARTICULARS :

1.1	Location / Terminal Name	:	
1.2	Reception facility provider(s)	:	
1.3	Treatment facility provider(s) (if different from above)	:	
1.4	Waste discharge date & time from	:	

2. SHIP PARTICULARS :

2.1 Name of Ship :	2.5 Owner or operator :		
2.2 IMO Number :	2.6 Distinctive number or letters :		
2.3 Gross Tonnage :	2.7 Flag state		
2.4 Type of ship :	Oil Tanker	Chemical Tanker	Bulk carrier
	Other cargo ship	Passenger ship	Ro-ro
			Container
			Other (specify)

3. TYPE & AMOUNT OF WAST RECEIVED :

MARPOL Annex I-Oil	Quantity (m3)	MARPOL Annex V-Garbage	Quantity (m3)
Oily bilge water	NA	a. Plastic	
Oily residues (Sludge)		b. Food wastes	
Oily tank washings	NA	c. Domestic wastes (e.g. paper products, rags, glass, metal, bottle, crockery etc.)	
Dirty ballast water	NA	d. Cooking oil	
Scale and Sludge from tank cleaning	NA	e. Incinerator ashes	NA
Other (Please specify)	Quantity (m3)	f. Operational wastes	
MARPOL Annex II-NLS		g. Cargo residues	NA
Category X Substance	NA	h. Animal carcass(es)	
Category Y Substance	NA	i. Fishing gear	
		J. e-Waste	
Category Z Substance	NA	MARPOL Annex VI – related	Quantity (m3)
OS – Other Substance	NA	Ozone-depleting substances and equipment containing such substances	NA
MARPOL Annex IV-Sewage	Quantity (m3)	Exhaust gas-cleaning residues	NA

On behalf of the Port Facility, I confirm that the above wastes were delivered.

Stamp & Signature :
Ship :

Stamp & Signature :
Terminal :

5 - indicate the proper shipping name of the NLS involved

6 - indicate the proper shipping name of the dry cargo

Ref. IMO Circular (MEPC.1/Circ.834)

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APPENDIX 3

FORMAT FOR REPORTING ALLEGED INADEQUACIES OF PORT RECEPTION FACILITIES

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 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 Number2: _____
1.5 Gross tonnage: _____
1.6 Port of registry: _____
1.7 Flag State3: _____
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)

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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 (m ³)	Amount not accepted (m ³)	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-Oil	Quantity (m3)		
Oily bilge water	NA		
Oily residues (Sludge)			
Oily tank washings	NA		
Dirty ballast water	NA		
Scale and Sludge from tank cleaning	NA		
Other (Please specify)	Quantity (m3)		
MARPOL Annex II-NLS			
Category X Substance	NA		
Category Y Substance	NA		
Category Z Substance	NA		
OS – Other Substance	NA		
MARPOL Annex IV-Sewage	Quantity (m3)		
MARPOL Annex V-Garbage	Quantity (m3)		
a. Plastic			
b. Food wastes			
c. Domestic wastes (e.g. paper products, rags, glass, metal, bottle, crockery etc.)			
d. Cooking oil			
e. Incinerator ashes	NA		
f. Operational wastes			
g. Cargo residues	NA		
h. Animal carcass(es)			
i. Fishing gear			
J. e-Waste			
MARPOL Annex VI – related	Quantity (m3)		
Ozone-depleting substances and equipment containing such substances	NA		
Exhaust gas-cleaning residues	NA		

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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)