

BALLAST WATER REPORTING FORM

IS THIS AN AMENDED BALLAST REPORTING FORM? YES ☐ NO ☐

1. VESSEL INFORMATION

Vessel Name:
IMO Number:
Owner:
Type:
GT:
Call Sign:
Flag:

2. VOYAGE INFORMATION

Arrival Port:	
Arrival Date (D/M/YYYY):	
Agent:	
Last Port:	Country of Last Port:
Next Port:	Country of Next Port:

3. BALLAST WATER USAGE AND CAPACITY

<i>Specify Units Below (m³, MT, LT, ST)</i>		
Total Ballast Water on Board:		
Volume	Units	No. of Tanks in Ballast
Total Ballast Water Capacity:		
Volume	Units	Total No. of Tanks on Ship

4. BALLAST WATER MANAGEMENT

Total No. Ballast Water Tanks to be discharged:

Of tanks to be discharged, how many: Underwent Exchange: Underwent Alternative Management:

Please specify alternative method(s) used, if any: _____

If no ballast treatment conducted, state reason why not:

Ballast management plan on board? YES ☐ NO ☐ Management plan implemented? YES ☐ NO ☐

IMO ballast water guidelines on board [res. A.868(20)]? YES ☐ NO ☐

5. BALLAST WATER HISTORY: Record all tanks to be deballasted in port state of arrival; IF NONE, GO TO #6 (Use additional sheets as needed)

Tanks/ Holds <small>List multiple sources/tanks separately</small>	BW SOURCE				BW MANAGEMENT PRACTICES						BW DISCHARGE			
	DATE D/M/YYYY	PORT or LAT. LONG.	VOLUME (units)	TEMP (units)	DATE D/M/YYYY	ENDPOINT LAT. LONG.	VOLUME (units)	% Exch	METHOD (ER/FT/ ALT)	SEA HT. (m)	DATE D/M/YYYY	PORT or LAT. LONG.	VOLUME (units)	SALINITY (units)
			m3	C			m3						m3	sg
			m3	C			m3						m3	sg
			m3	C			m3						m3	sg
			m3	C			m3						m3	sg
			m3	C			m3						m3	sg
			m3	C			m3						m3	sg
			m3	C			m3						m3	sg

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

6. RESPONSIBLE OFFICER'S NAME AND TITLE, PRINTED AND SIGNATURE:
