|  |
| --- |
| OMB Control Number 2133-0545Expiration Date: 02-28-2013 |
| ***Paperwork Reduction Act* Statement.**  According to the *Paperwork Reduction Act of 1995*,a federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2133-NEW. Public reporting for this collection of information is estimated to be approximately 60 minutes per response, including the time for reviewing instructions, searching existing date sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. All responses to this collection of information are voluntary. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Maritime Administration, Office of Management and Administrative Services, MAR-390, 1200 New Jersey Avenue, SE, Washington, DC 20590. |

**Call Script**

Mr./Ms. [INSERT NAME]:

This is [INSERT NAME] from the Maritime Administration:

The Maritime Administration is conducting a Test Run of scenarios when a determination of coastwise-qualified vessel availability may be required.  The purpose of the Test Run is to verify procedures, industry points of contact, feedback mechanisms, etc. to develop lessons learned which will support making procedural changes necessary to make our availability assessments.

Would [COMPANY NAME] be available in the event of a request for coastwise-qualified vessels?

We have you listed as the point of contact for [COMPANY NAME]. Please verify the information below.

 -- Name:

 -- Phone Numbers:   (Work)

                                   (Mobile)

 --E-mail address:

We list the following coastwise qualified vessels for [COMPANY NAME].  Please confirm (vessel/vessels), operating manager(s) or broker(s), the name(s) and registration number(s), the current location(s) and location(s) expected on [DATE], maximum draft, length, beam, maximum speed, capacity, whether the vessel(s) is under charter, and (specified special characteristics [or] conformity to stated port or terminal limitations or restrictions.)

Thank you for your assistance.