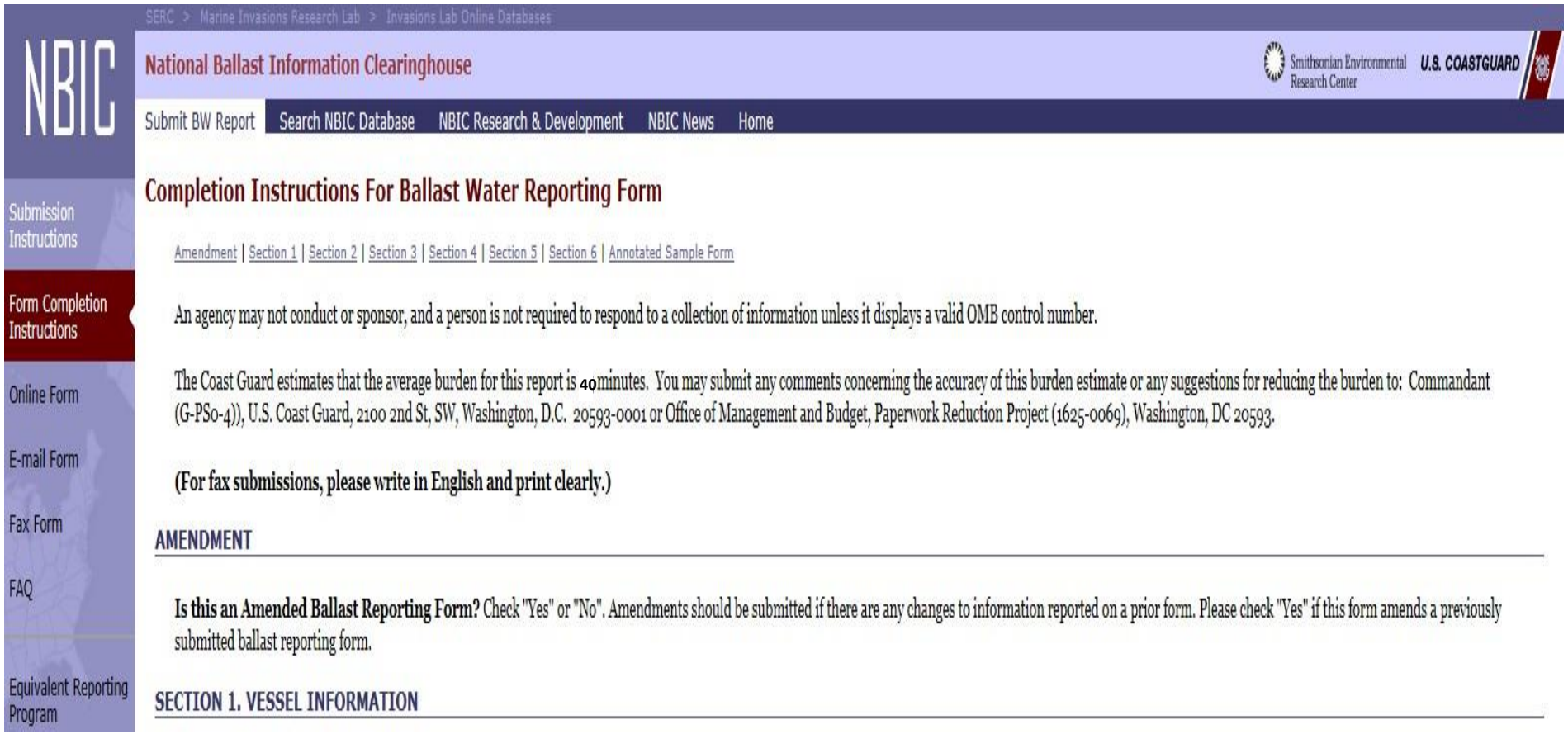
OMB No.: 1625-0069
Exp. Date: 08/31/2018

Instructions for the BWM Online Form



(For fax submissions, please write in English and print clearly.)

AMENDMENT

Is this an Amended Ballast Reporting Form? Check "Yes" or "No". Amendments should be submitted if there are any changes to information reported on a prior form. Please check "Yes" if this form amends a previously submitted ballast reporting form.

SECTION 1. VESSEL INFORMATION

Vessel Name: Enter the name of the vessel. For tug and barge combinations, please list both vessel names, separated by a hyphen.

IMO Number: Fill in identification number of the vessel used by the International Maritime Organization. For tug and barge combinations, please list both vessel numbers, separated by a hyphen.

Owner: Enter the name of the registered owner(s) of the vessel. If under charter, enter Operator name.

Type: List specific vessel type. Use the following abbreviations: bulk (bc), roro (rr), container (cs), tanker (ts), passenger (pa), oil/bulk ore (ob), general cargo (gc), reefer (rf). Write out any additional vessel types.

GT: Enter the Gross Tonnage of the vessel.

Call Sign: Enter the official call sign.

Flag: Fill in the full name of the country under whose authority the ship is operating. ***No abbreviations please.***

SECTION 2. VOYAGE INFORMATION

Arrival Port: Enter the name of your United States port or place of destination for this voyage, including the City or State, where applicable. ***No abbreviations please.***

Arrival Date: Enter the arrival date to the arrival port orp ace. Use European ate ormat (DD MM ').

Agent: Llst agent used for the Arrival Port.

Last Port: Fill in the last port at which the vessel called, either outside the US EEZ or the previous US port or place the vessel arrived to, including the City or State, where applicable. *No abbreviations please.*

Country of Last Port: Fill in the country of "Last Port". *No abbreviations* please.

Ne. Port: Fill in the port at which the vesselfllcall immediately after departing the Arrival Port. *No abbreviations* please.

Country of Next Port: Fill in the country of 'Next Port" at which the vesselfllcall immediately after departing the Arrival Port. *No abbreviations* please.

SECTION 3. BALLAST WATER

Total Ballast .Yater on Board:

Volun1e: Enter the total volume of ballast water on board upon arrival into the "Arrival Port" listed in Section 2. Do not count potable water.

Units: Fill *in the* correct *volume units* (m3, MT, LT, sn.

Nllllber of Tanks in Ballast: Count the number of ballast tanks and holds with ballast as vessel arrives into the "Arrival Port" listed in Section 2.

Total Ballast Water Capacity:

Vollllle: What is the maximum volume of ballast water used when no cargo is on bo<ird?

Units: Please *include volume units* (ffi3, MT, LT, sn.

Total NUillber of Tanks on Ship: Count all tanks and holds that can e<irry ballast water (do not include tanks that =rypotable water).

SECTION 4. BALLAST WATER MANAGEMENT

Total No. of tanks to be discharged: Count tanks and holds with ballast to be discliarged within the US EEZ, or into an approved reception facility. Count all tanks and holds separately (e.g., port and starboard tanks should be counted separately).

Of tanks to be discharged, how many Underwent Ex change: Count all tanks that are to be discharged within the US EEZ or into an approved reception facility.

Of tanks to be discharged, how many Underwent Alternative Management: Count all tanks that are to be discliarged in the port state of arrival or an approved reception facility.

Please specify alternative method(s) used, if any: Specifically, describe methods other than Empty/Refill or Flow-Through used for ballast management.

If no ballast treatment conducted, state reason why not: This applies to *all tmexchanged tanks and holds* being discharged in the port state of arrival or into an approved reception facility.

!ll!:!!!!'ilManagement Plan onboard?: Is thereawrittendocument onboard,specifictoyour vessel,describing the procedurefor ballast management? This should include safety and exchange procedures (usually provided by **vesselsowner or operator). Check Yes or No.**

Management Plan implemented?: Do you followthe above management plan? Check Yes or No.

IMO Ballast Water Guidelines on board?: Is there a copy of the International Maritime Organization (IMO) Ballast Water Guidelines on board this vessel (ie."Guidelines for the Control and Management of Ships Ballast WatertoMinimizetheTransferAquaticOrganismsandPathogens",[Res.A.868(20)])? Check Yes or No.

SECTION 5. BALLAST WATER HJ.STORY

(Record all tanks to be deballastedwithin coastal waters (12rnn) of the US, either en route toor at the arrival port: If none,goto #6)

Tanks/Holds: Please list *all tanks and holds* that youhavedischarged or plantodischargeintowaters of the United States or into anapprovedreception facility (write out). Followeach tank across the page listing all source (s),all management events,and all discharge events separately.

List each tank on *a* separate line. Paired port and starboard tanks "th identical ballast water histories may be included on same line. Please use an additional page if necessary,being careful to include ship name,date,and IMO number at thetopof each.

For tanks with multiplesources: list 3largest sources from last 30 dayson separate lines. If more than 3sources,include a 4th line for the respective tank(s) that indicates"Multiple"in port column and listthe remaining tank volume not includedin the 3largest sources (i.e. total tankvolume minus volumeof the 3largest sources).

-BW SOURCES-

Date: Record date of ballast water uptake. UseEuropean format (DDMMYY).

Port or latitude/longitude: Record location of ballastwater uptake. *No abbreviationsfor ports.*

Volume: Record totalvolume of ballast water uptake,*withvolume units.*

Ten1p: Record water temperature at timeofballast water uptake, indegrees Celsius (include units).

-BW MANAGEJ\fff"lff PRACilCES-

Date: Date of ballast watermanagement practice. If exchanges occurred over multipledays,list the day when exchanges werecompleted. Use European format (DDMMYY).

Endpoint orlatitude/longitude: Report location of ballast water management practice. If anexchange occurred over an extended distance, listthe endpoint latitude and longitude.

Volume: Report total volume of ballast water moved (i.e,gravitated and pumped into tanks,discharged to reception facility) during management practice,*with units.*

% E-change: (Note: for effective flow through exchange,this value should be at least 300%).

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$$\%\ \text{Exchange} = \frac{\text{Total Volume Added by Empty/Refill or by Flow Through}}{\text{capacity of Ballast Tank or Hold}} \times 100$$

Method: Indicate management method using code (ER = empty/refill, Ff = flow through, ALT = alternative method).

Sea Ht.(m): Estimate the sea height in meters at the time of the ballast water exchange if this method was used, using a number usually between 1 and 5. (Note: this is the combined height of the wind-seas and swell, and does not refer to water depth).

-BW DISCHARGES-

Date: Date of ballast water discharge. Use European format (DD/MM/YYYY).

Port or latitude/longitude: Report location of ballast water discharge. *No abbreviations for ports.*

Volume: Report volume of ballast water discharged, *with units.*

Salinity: Document salinity of ballast water at the time of discharge, *with units* (i.e., specific gravity (sg) or parts per thousand (ppt)).

SECTION 6. TITLE AND SIGNATURE

Responsible officer's name and title (printed) and signature: Print name and title, include signature. A signature is not necessary on electronic forms.

Annotated Sample Form

Annotated Sample Form

Download a Wf of the Annotated Saml e Form