Ship Bunkering Request



Application Time:	Date:	Berth:		
I hereby request permission		(vessel name) of(name of Agency) to undertake bunkering.		
		hrs on		_
Estimated completion time				
Ships Agent/Representative:				
Transfer Operator:		Type & Quantity:		
Wx Forecast Wi	nd Dir:	Wind Sp:		
Tidal Conditions (By sea only) LW	<i>!</i> :	HW:		
Signed by Agent/Representative	:			
Name:		Signature:		
				/ N
Operational Restrictions During Bunkering Operations			ROAD	SEA
Current approved NRC Tier 1 Oil Spill Plan in place				
Daylight hours only No decrease and transfers				
 No dangerous goods transfers Receiving ship not to be under fumigation or venting 				
No Hotwork to be undertaken ships side or onboard				
No deck cargo operations adjacent to bunker vessel/vehicle or cargo stopped				
Maximum sustained wind speed of 25kn from any direction				
 Safe working area available ship side for bunker operation 				<u>NA</u>
 No shipping movements fr 	om Northport's facility dur	ing transfer	<u>NA</u>	
Harbourmaster Approval:	Approved	l / Declined		
Reasoning:				
Name:	Signature	:: 		
Northport Approval:	Approved	l / Declined		
Reasoning:				
Name:	Signature	::		