ABP | KEEPING BRITAIN TRADING

BUNKER CHECKLIST

PORT OF BARROW

This bunker checklist is to be completed before the commencement of any bunkering or oil transfer operations. The checklist is to be retained on board and may be subject to inspection by the Harbour Master.

If the vessel is bunkering on the Leading Jetty, the completed checklist shall be sighted by Marine Control Staff prior to commencement of transfer.

The checklist is to be completed fully and the declaration at the bottom signed. The bunkering operation must be adequately supervised at all times by a representative of the supplier (or pump operator) and receiver.

Barrow Port Radio must be contacted immediately in the event of oil or other pollutant spilling into the water. Failure to do so may result in a prosecution.

	YES	NO
1. Are NO SMOKING notices positioned and observed?		
2. Are adequate fire fighting appliances available?		
3. Is there an agreed Ship/Shore communication system?		
4. Are the correct type of gaskets in use?		
5. Are drip trays in position?		
6. Are scuppers and drains effectively plugged?		
7. Have transfer rates been agreed?		
8. Have emergency shutdown procedures been agreed?		
9. Is the vessel securely moored?		
10. Is there a supply of counter pollution equipment nearby?		
11. Are bunker hoses safely secured at the manifold?		

12. Have all unused valves in the bunker system been checked closed and lashed? Are unused bunker connections properly blanked?		
13. Are all bunker hoses properly rigged and free from twists?		
14. Have port control been advised that the bunkering operation is to take place and that the checklist has been completed		
15. Have Port control been advised that bunkering operations have been completed		
16. Other controls and checks		

Vessel & Location / Site…………………………………………………….....................

Master / Duty Manager .…………………………………………………………………...

Date & Time of delivery…………………………………………………………………….

Supply Company…………………………………………………………….....................

Type and Quantity of liquid to be transferred………………………………………………...

Viscosity ……………………………………………………………………………………

DECLARATION

We confirm that we have checked the items on the checklist and are satisfied that the answers given are correct.

TANKER OPERATOR   FOR VESSEL

NAME…………………………………….   NAME…………………………………..

SIGNATURE…………………………………..   SIGNATURE………………………………..

TIME & DATE…………………………………..   TIME & DATE………………………………