

TOWING VESSEL PARTICULARS

USER FEES: Unpaid / Paid date:			Regulatory Option: TSMS / Coast Guard Option		
Vessel Details/Involved Parties					
Vessel Name:		Official No:		Call Sign:	
Hailing Port:		Place Built:		MMSI:	
Vessel Phone:			Email:		
Owner:					
Owner Address:					
Operator:					
Operator Address:					
TPO:			TPO POC:		
POC Phone:			POC EMAIL:		
TPO Address:					
Lead Captain:			MMC:		Exp. Date:
Charterer:					
Inspection/Survey/Audit Dates					
Surveys					
All			TSMS Option		CG Option
	ISE	DRYDOCK	Annual (External) by TPO	Annual (Internal) by Qualified Company Representative	Annual Survey
Cite/Reference	137.135 137.300	137.135 137.300	137.205 137.215	137.210	137.200
Interval	Fresh-5 Years Salt-2/5 <3	Fresh-5 Years Salt-2/5 <3	w/ in 3 months of COI Anniversary	Annual (does not have occur in one instance)	3 months before/after COI Anniversary
Prior					
Last					
Next					
TSMS Audits					
	Mid Period Management (External)	Management Audit (External)	Management Audit (Internal)	Vessel Audit	
Cite/Reference	138.315	138.315(a)	138.310(a)	138.315(b)	
Interval	(Month 27-33)	5 yr (Issuance/Renewal of TSMS Cert.)	(w/in 3 months of anniversary date of TSMS Cert.)	Owned >6 months prior to COI IF Owned <6 Months to be completed w/in 6 months of COI Issuance)	
Prior/Initial					
Last/Random					
Next					

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Vessel Specifics

Keel Laid:	Delivery Date:	Length:	Beam	Draft:
Draft:	Gross Tons:	Net Tons:	Dwt Tons:	Hull Material:

Main Propulsion	Make/Model	Horsepower/KW/Reduction	Date Installed/Last overhaul:
PORT			
STBD			
Misc. Main Engine			
Misc. Main Engine			
PORT Reduction Gear			
STBD Reduction Gear			
Misc. Reduction Gear			
Misc. Reduction Gear			

No. of Shafts: _____ Propulsion System Drive (i.e Diesel Reduction/Z Drive): _____

Gen. Sets:	Make/Model	Horsepower/KW	Date Installed:
PORT			
STBD			
Misc.			

Steering/Maneuvering Systems

Main Steering Control Type	Emergency Steering Control Type	# of Rudders	Flanking Rudders
			Y N

Thrusters

Location	Drive Type	Horsepower/KW

Tank Information	Fuel Oil (Diesel)	Lube Oil	Hydraulic Oil	Slops	Sewage	Water
No. onboard						
Total Qty.						
Location						
Inspection: Prior to Last						
Inspection: Last						
Inspection: Next						

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Doublers(Description/Justification)				Size:	Location:
Bilge Sys. Capacity:	# of Pumps:	Fixed: Y N	Inductor: Y N		
Ballast Sys. Capacity:	Fixed: Y N	Sys. Type:	Segregated Water	Solid	Water Other
Vessel Characteristics					
Route description (as per 46 CFR 136.110)					Requested Route
Rivers: River, canal, or other similar body of water designated by the cognizant OCM.					
Lakes, Bays & Sounds: Lake other than the Great Lakes, a bay, a sound, such other similar waters as may be designated by the cognizant Coast Guard District Commander.					
Ltd. Coastwise: Not more than 20 nautical miles from a harbor of safe refuge, as defined in this section.					
Coastwise: Not more than 20 nautical miles offshore on any ocean, Gulf of Mexico, Caribbean Sea, Bering Sea, Gulf of Alaska; or such other similar waters as may be designated by a Coast Guard District Commander.					
Great Lakes: Route on the waters of any of the Great Lakes and of the St. Lawrence River as far east as a straight line drawn from Cap de Rosiers to West Point, Anticosti Island, and west of a line along the 63rd meridian from Anticosti Island to the north shore of the St. Lawrence River.					
Ocean: More than 20 nautical miles offshore on any of the following waters; any ocean, Gulf of Mexico, Caribbean Sea, Bering Sea, Gulf of Alaska, or other similar waters as may be designated by the cognizant Coast Guard District Commander.					
Watch schedule+					
Hull Inspection Interval Request					Requested
Fresh Water Insp. Interval/46 CFR 137.300(a)(2)	Hull	A vessel that is exposed to salt water not more than 6 months in any 12-month period since the last examination or initial certification must undergo a drydock and internal structural examination at least once every 5 years .			
Salt Water Insp. Interval/46 CFR 137.300(a)(1)	Hull	A vessel that is exposed to salt water more than 6 months in any 12-month period since the last examination or initial certification must undergo a drydock and internal structural examination at least twice every 5 years, with not more than 36 months between examinations .			
MTSA applicability (date of last MTSA Verification):					
Fire Fighting					
Fire Control Plan: Y N	Approval Date:	FF Outfit w/ SCBA:	Fire Main: Y N	Portable Fire Pump: Y N	
Fire Detection:	Date Last Serviced:	P.E. Letter: Y N	Protected Zones:		
# of Fire Stations:	Required Portable Extinguishers:	Actual Onboard Portable Extinguishers:	BV Semi Portable: Y N		
Fixed E/R Suppression System: Y N	System Type:		Bottle Location:		
Fifi System: Y N	Drive Type:		Pump Drive Location:		
Life Saving					
Primary			Total Persons Vessel Equip'd for:		
	QTY	CAPACITY		QTY	CAPACITY
Lifeboats (Total):			Workboat:		
Lifeboats (PORT):			Rescue Boat:		
Lifeboats (STBD):			Inflatable Rafts:		

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Lifeboat w/ Radio:				Lifefloat/Buoyant App.:				
Motor Lifeboat:				Inflatable Buoyant App (IBA):				
Required Equipment								
	QTY			QTY		QTY		
Ring Buoys		Life Preservers Adult		Portable Liferaft Radio				
Ring Buoys w/ Lights		Life Preservers Child		Qual'd Radio Operators				
Ring Buoys w/ Line		Immersion Suits		EPIRB				
Ring Buoys w/ Smoke		Anti-Exposure Suits		Lifesaving Pers. Support				
Ring Buoys Other		Thermal Aids						
Miscellaneous Equipment								
		Qty				Qty		
Self Righting Enclosed Lifeboat PORT				Self Righting Enclosed Lifeboat STBD				
Totally Enclosed Lifeboat PORT				Totally Enclosed Lifeboat STBD				
Self Contained Air Support Lifeboat PORT				Self Contained Air Support Lifeboat STBD				
Fire Protected Lifeboat PORT				Fire Protected Lifeboat STBD				
Marine Evacuation System				Equipment for People				
Lifefloats/ Buoyant Apparatus								
Serial#	Material Type	Capacity	Q Number	Manufacturer	Date Built	Description		
Boats/ Lifeboats/Rescue boat/Workboat								
Boat #/Location/Designation	Material Type	Model #	Condition	Style	Propulsion	Length	Capacity	Build Date
Lifting Apparatus								
Boat Number/Location	Davit Serial #	Manufacturer	Winch Series	Winch Manufacturer	Weight Tested	Last Tested		
Line Throwing Appliance								
	Qty	Q - Spec #		Manufacturer	Description			
Rocket Hand								
Rocket Rail								
Shoulder								
Documents								
UTV DECAL:	Expiration Date:		Issuing CG Unit:					
Documents to be submitted (Copies) :								
Certificate of Documentation								
Manning Proposal/request								
Ownership Documents								
Towing Safety Management Certificate								

