

Bureau de la sécurité des transports du Canada

PROTECTED when completed

REPORT OF A MARINE OCCURRENCE / HAZARDOUS OCCURRENCE REPORT

Complete only those sections that apply

Marine occurrences shall be reported to the Board or a Canadian Radio Ship Reporting Station as soon as possible and by the quickest means available. This form is to be completed as soon as possible, but no later than 30 days after the reportable marine occurrence and forwarded to the Transportation Safety Board.

The information provided is required under the Transportation Safety Board Regulations and is protected under the Canadian Transportation Accident Investigation and Safety Board Act. Furthermore, personal information contained in this report received by the Board is protected under the Privacy Act and will be stored in the Personal Information Bank # TSB PPU 005.

Note: Where applicable and subject to the Canadian Transportation Accident Investigation and Safety Board Act, some information may be required to be reported to Transport Canada under the Canada Shipping Act, 2001 and the Canada Labour Code, Part II. Personal information communicated to Transport Canada is also protected under the Privacy Act and will be stored in Personal Information Bank # DOT PPU 048.

Transportation Safety Board of Canada 200 Promenade du Portage, Place du Centre, 4th floor Gatineau QC K1A 1K8

Phone: 819-994-3741

1-800-387-3557 (toll free in Canada)

Fax: 819-997-2239

Email: MarineNotifications@bst-tsb.gc.ca

PART 1 — OCCURRENCE IN	ORMATION				
Date of occurrence			Location (geographical name of	body of water, waterway, harbour or	r berth)
Year Month	Day				
Time of occurrence (hh:mm)			Latitude	Longitude	ļ
Vessel particulars					
Name of vessel					
Port of registry			Flag		
Type of vessel (tanker, bulk cal	rier, tug, fishing vessel)				
PART 2 — ENVIRONMENTAL	CONDITIONS				
Visibility Sea condition				Ice presence	
Distance	Condition	Sea state		Ice coverage /10	

PART 2 —	ENVIRONA	MENTAL CO	ONDITIONS									
Visibility						Sea conditions			Ice presence			
Distance			Condition			Sea state			Ice coverage	/10		
Miles	Cables	Metres	Day	Night	Twilight	Swell direction			Icebergs	Yes	No	
Weather Co	onditions					Swell height	Metres	Feet	Bergy bits	Yes	No	
Clear			Rain			Temperature			Growlers	Yes	No	
Fog			Sleet			Air	°C	: °F	Under ice regime	Yes	No	
Hail			Snow			Water	°C	°F	Observed by (example:	ice navigator	r)	
Overca	st		Thunderstor	m/Lightning]	Wind			Vessel icing present	Yes	No	
						Wind direction			Approximate icing thickness		Metres	Feet
						Wind speed		Knots or Beaufort	Ice advisor or navigator on board:	Yes	No	

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	For Transportation Safety Board	Copy to Head Office	File number
	use only	Copy to TC	M
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PART 3 — TYPE OF MARINE OCCURRENCE (select all that apply)

A person is killed or sustains a serious injury as a result of

boarding, being on board

falling overboard from the ship

coming into direct contact with any part of the ship or its contents;

a person falls overboard (not resulting in death or serious injury)

a crew member whose duties are directly related to the safe operation of the ship is unable to perform their duties as a result of a physical incapacitation which poses a threat to the safety of persons, property or the environment

The ship

sinks

founders

capsizes

is involved in a collision

is involved in a risk of collision

sustains a fire

or an explosion

goes aground

makes unforeseen contact with bottom without going aground

sustains damage that affects its seaworthiness or renders it unfit for its purpose

is anchored, grounded or beached to avoid an occurrence,

is missing

is abandoned

fouls a utility cable or pipe, or an underwater pipeline

sustains a total failure of

the navigation equipment if the failure poses a threat to the safety of any person, property or the environment,

the main or auxiliary machinery, or

the propulsion, steering, or deck machinery if the failure poses a threat to the safety of any person, property or the environment;

all or part of the ship's cargo shifts or falls overboard; or

there is an accidental release on board or from the ship consisting of a quantity of dangerous goods or an emission of radiation that is greater than the quantity or emission levels specified in Part 8 of the Transportation of Dangerous Goods Regulations

PART 4 — VESSEL PARTICULARS - continued							
IMO number			Official or registered number	Official or registered number			
Gross tonnage			Canadian fishing vessel licence number	er (VRN)			
Call sign			AIS/MMSI number				
Length	Metres Registered Feet LOA		Breadth	Metres Feet	Extreme Moulded		
Hull material:	•		Propulsion type (sail, propeller, azipod, etc.)				
Classification society and notations:			Former name(s)				
Name and address of owner, manage	er or authorized repre	esentative					
Company name			Contact type (agent, owner, manager)				
Name contact person/DPA							
Address							
Telephone							
Email							

PART 5 — DAMAGE							
Vessel damage	Damage to other vessel(s)/other object(s)						
Total loss Partial Loss	Object description (e.g. berth, buoys, other vessels, shore installations, bridge):						
Brief description of location and extend of damage	None apparent	Minor	Major	Ice related			
					Description of damage and level of damage:		

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PART 6 — OCCURRENCE VOYA	AGE						
Last sailed from (examples: a port name, fishing grounds, offshore production or other vessel at sea)			Destination (examples: a port name, fishing grounds, offshore production or other vessel at sea)				
Date of departure Year Time	Month	Day	Draught (at time of Forward	f the occurren Aft	•	Metres Feet	
Description of cargo/ballast					Total weight	Unit (tonnes, litres, etc.)	
Nature of operation at time of occi	urrence (e.g., fishing, carriage of good	ls, excursion, etc.):					
Speed at time of occurrence:			Course at time of occurrence:				
List of life saving appliances and/o SART, EPIRB, etc.)	or safety equipment used (<i>life rafts, fire</i>	efighting gear, pumps,	Description of se	earch and resc	ue services rendered/rece	ived:	
Fishing Vessels Only							
Fishery type engaged in at time of	f occurrence (salmon, crab)		Check if equippe	ed for multiple	fisheries at the time of the	e occurrence	
Gear type in use at time of occurre	ence (traps, long line, seine)		Check if the ves	sel is licenced	for multiple fisheries		
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PART 7 — POLLUTANTS AND DANGEROUS GOODS									
Fuel/products of		Fuel/products released							
Shipping name of	Quantity	Quantity	Release Units on board at sea	Release		UN number	From		Stowed on
commodity	on board	released		at sea	ON HUITIDE	Bunkers	Cargo	deck	
					·				

PART 8 — SHIPBOARD EQUIPMENT										
Check "Y" if on board and "Z" if on and in use at the time of the occurrence										
	Y Z		Y Z	Y Z		Υ	Z			
Radar 1 (ARPA)		ECDIS		Bridge navigational watch alarm system	VHF					
Radar 2 (ARPA)		ECS		(BNWAS)	MF/HF					
Magnetic compass	Magnetic compass GPS			Echo sounder	INMARSAT-B or Fleet					
Gyro compass	Integrat	ed Bridge System		Speed log	INMARSAT-C					
Automatic pilot	Integrated N	Navigation System		AIS	Dynamic Positioning System					
Other	Specify			LRIT						
Voyage data recorder on board	Voyage data recorder on board No VDR		SVDR	Describe actions taken to save data:	Describe actions taken to save data:					
Make	Model									

PART 9 — INFORMATION REGARDING THE OCCURRENCE	
IMPORTANT ADVICE – Check one box	VES authorization is given to communicate the following description to TC
The following description is privileged under section 30 of the <i>Canadian Transportation Accident Investigation and Safety Board Act</i> and, as such, will not be communicated to any person except as provided by that Act or as authorized in writing by the person who	YES authorization is given to communicate the following description to TC. NO authorization is refused to communicate the following description to anyone outside the TSB.
completed this description.	Last name:
Failure to check a box will be considered as withholding authorization to communicate	
the following description.	First name:
This information will be reviewed by the Transportation Safety Board to assist the Board in blank page.)	neeting its object to advance transportation safety. (If more space is required please add a
Describe the events and circumstances leading to the marine occurrence.	
Describe corrective actions taken, if any, to reduce the risk of a similar occurrence happening	g in the future.
Provide a description of any action taken or planned to protect persons, property and the er	vironment.
DART 10 INFORMATION DECARDING DEPSON COMPLETING THIS FORM	

PART 10 — INFORMATION REGARDING PERSON COMPLETING THIS FORM							
Check if same as name and address of owner, manager or authorized representative and complete date only.							
Last name				First name			
Address				Position			
Telephone				Email			
Date completed	Year	Month	Day				

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PART 11 — PERS	PART 11 — PERSONNEL / INDIVIDUALS								
	Total number of people on board	Evacuated	Missing	Minor injuries	Serious injuries (an injury that is likely to require admission to hospital)	Death			
Crew									
Passenger									
Guests									
Other									
Total									

PART 12 — LIST OF VICTIMS (in case of fatalities or injuries) If more space is required, use a separate sheet.									
	Casualty 1		Casualty 2						
Last name	First name	Nationality	Last name	First name	Nationality				
DOB	Gender	Rank on board	DOB	Gender	Rank on board				
On duty/watch	Location on board	Hospitalized	On duty/watch	Location on board	Hospitalized				
		Yes No			Yes No				
Injury type (fracture, burn)	Mode of injury (fall, slip)	Body part(s)	Injury type (fracture, burn)	Mode of injury (fall, slip)	Body part(s)				
Person in water	Time in water	Lifejacket/PFD	Person in water	Time in water	Lifejacket/PFD				
Yes No	minutes	Yes No	Yes No	minutes	Yes No				
Recovered	Hypothermia		Recovered	Hypothermia					
Yes No			Yes No						

PART 13 — WATCHKEEPING PERSONNEL								
Personnel	Master or person in charge	Officer of the watch	Engineer of the watch	Pilot on board	Pilot with conduct of vessel	Other pilot on board		
Last name				Last name				
First name				First name				
CDN number (Canadian citizens only)				License number				
Grade of certificate				Grade of license				
Country of issue				Date of issue				
Pilotage exemption	Yes No	Yes No		Pilotage authority				
Duty schedule on the day of the occurrence								
On duty	Yes No							

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Particulars of tow	To	Tow # 1		Tow # 2		Tow # 3	
Name							
Official number							
Port of registry							
Type of vessel							
Gross tonnage							
Length		Metres Feet		Metres Feet		Metres Feet	
Breadth		Metres Feet		Metres Feet		Metres Feet	
Year built							
Hull material							
Hull construction	Single skin	Doubled hull	Single skin	Doubled hull	Single skin	Doubled hull	
Draught	Fwd	Metres	Fwd	Metres	Fwd	Metres	
	Aft	Feet	Aft	Feet	Aft	Feet	
Ice class							
Description and location of cargo							
Weight of cargo (specify units)							
Extent and location of damage							
Length of towline		Metres Feet		Metres Feet		Metres Feet	
Total length of tow (stern towing vessel to stern last towed object)				Metres Feet			

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PART 15 — ADDITIONAL INFORMATION Type of occurrence	RELATED TO PERSONAL	LINJUNT/HAZANDO	US OCCURRENCE, RE	QUIKED BT TH	E CANADA LABOUR CODE FART II	
	abling injury	Emergenc	y procedure	Fire/explosion		
Other (specify)						
Witnesses			Supervisor's name			
Site of hazardous occurrence Direct causes of hazardous occurrer			dous occurrence	9		
Specify training in accident prevention give	n to injured employee in rel	lation to duties perforn	ned at the time of the ha	zardous occurre	nce.	
Corrective measure and date employer will implement						
, ,	·					
Supplementary corrective measures						
Name of person investigating	Date					
Title		E-mail			Telephone	
					·	
Name of safety committee member or safety and health representative					Date	
Title		E-mail		Telephone		

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