CALIFORNIA CLEAN COAST ACT OF 2005 Survey Form

To be filed once at the vessel's first port call in California during 2006

Vessel Name:	e IMO or Of	_● IMO or Official Number:			
Vessel Type (circle one): Auto Bul	k Container	General	Military	Tank	
Unmanned Barge Other					
Owner Name:					
Operator Name:					
Flag State: Keel Lai	d Date	_ ● Gross T	onnage (M	T)	
Typical or Required Number of Crew:					
Graywater Holding Tank Capacity in MT (if applicable):					
Blackwater Holding Tank Capacity in MT (if applicable):					
Marine Sanitation Devices					
 Number of Devices 					
 Treatment Type (circle one) Ty 	rpe I Type II T	ype III Oth	er		
Size of holding or storage tank in MT (if applicable)					
Does This Vessel Have Connections to Transfer Sewage to shore:					
o <u>YES</u> <u>NO</u>					
 Does This Vessel have Connections to Transfer Graywater to Shore: YES NO 					
• Expected California Port Calls in 20	06:				
Estimated Total Days in California F	Port in 2006:				
Responsible Person's Name and Ti	tle:				
Printed Name Title		Signature			

Submit signed and completed form to: bwform@slc.ca.gov, or 562-499-6444 or CSLC Marine Facilities Division, 200 Oceangate, Suite 900, Long Beach, CA 90802

MAINTAIN A COPY OF THIS FORM ON BOARD THE VESSEL

Instructions for filling out the California Clean Coast 2006 Survey Form

All oceangoing vessels operating in California waters during 2006 are required to submit the following information to the California State Lands Commission:

- Identify the Vessel Name and IMO or Official Number in the spaces provided.
- Circle the appropriate vessel type. If the vessel type is not listed include the vessel type in space identified as "Other"
- Record the Owner Name and Operator Name.
- Record the Flag State, Keel Laid Date, and Gross Registered Tonnage (in MT)
- Record the typical or required number of crew necessary for the specific vessel
- Record, in MT, the graywater holding tank capacity. Identify the type of graywater (e.g. some, all, galley drains only, laundry only, portside only, etc.) in the space provided.
- Record, in MT, the blackwater (sewage, sewage sludge) holding tank capacity. Identify
 as necessary the type of blackwater (e.g. some or all stored before treatment, some or
 all stored after treatment, whether blackwater and graywater are mixed after or before
 treatment, etc.) in the space provided.
- Record the number of Marine Sanitary Devices (MSD) onboard the vessel.
- Record the type(s) (e.g. Type I, Type II, Type III) of MSD onboard the vessel
- Record the size, in MT, of any holding or storage tanks associated with the vessels MSD.
- Identify whether the vessel has the ability to transfer blackwater to shore.
- Identify whether the vessel has the ability to transfer graywater to shore.
- Record the estimated number of California Port calls during 2006.
- Record the total number of days the vessel is expected to be in California waters during 2006.
- The master, owner, operator, person in charge, or responsible office should sign the Survey Form attesting to the accuracy of the information included on the form.
- Submit the signed form to the California State Lands Commission. Forms can be submitted to: bwform@slc.ca.gov, or 562-499-6444 or CSLC Marine Facilities Division, 200 Oceangate, Suite 900, Long Beach, CA 90802
- Maintain a copy of the signed form on board the vessel.