

## Vessel Traffic Service - Pre-Arrival Form

### Ship Details

Vessel Name		
Vessel's email address		<i>For Electronic MPX</i>

### ARRIVAL Draft

### DEPARTURE Draft (Predicted)

Draft forward			Draft forward	
Draft aft			Draft aft	
Displacement (Berthing)				

### Engineering & Equipment

Navigation equipment	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Is your navigation equipment in good working order? If "No" enter remarks below	
Propulsion	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Are your engines available for full manoeuvrability? If "No" enter remarks below Will your propeller be 110% immersed?	
Propeller immersion	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Thrusters	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	If you have a bow or stern thruster, are they operational?
Remarks				

Steering	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Has Emergency Steering Test been conducted?
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Mooring Lines	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Are mooring lines in good condition? Type? Rope <input type="checkbox"/> Wire <input type="checkbox"/>
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Defects or Deficiencies	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Do you have any defects or deficiencies?
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Incidents	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you had any fires or incidents onboard since last port?
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### Health & Security

Crew Health	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Are you crew healthy and free of COVID at the time of submitting this form?
Onboard Screening	Yes <input type="checkbox"/>	No <input type="checkbox"/>	For Cruise ships - <b>If no: Require 3rd party onboard screening</b>

### Forms & acknowledgments

Pilot Ladder Checklist	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you read, understood, and submitted the pilot ladder checklist?
VTS Reporting	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you read and understand <b>'Vessel Reporting Requirements within VTS Areas'</b> ?
DG Manifest requirements	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Have you submitted a DG manifest if carrying dangerous goods?

If 'No' to any question above, please enter details below


Vessel Master's Name:

Master's Signature:

Date: