## **EMERGENCY RESPONSE SYSTEM (ERS)**

## And Emergency Response Towing Vessel (ERTV) Enrollment Agreement

## **Schedule of Vessel Information**

Vessel's Name:	Cargo Oil (if applicable):
Flag (Port of Registry):	Vessel's <u>Cargo Oil</u> Capacity: BBLS
Official or IMO Number:	Type of Oil Cargo Carried(check all that apply):  □ Crude Oil
Gross Registered Tons (GRT):	☐ Product (list oil products carried):
Deadweight Tons (DWT):	1 Poddet (list on products carried).
Dwlaf 'Fevg:	□ Non-Petroleum Oil (list):
Vessel characteristics information will be verified using Lloyds	Fuel Oil:
Will Vessel Call in Washington ports of the Puget Sound	Vessel's Fuel Oil Capacity:BBLS
region via Strait of Juan de Fuca? ☐ Yes ☐ No (if not, ERS/ERTV enrollment and this Schedule are not necessary)	Type of Fuel Oil Carried:
Vessel Type (check type):	Worst Case Discharge (WCD) for oil spill contingency
☐ Tank Ship (carrying oil of any kind as cargo)	planning purposes:BBLS
<ul><li>☐ Tank Ship (not carrying oil as cargo)</li><li>☐ Tank Barge (carrying oil as cargo)</li></ul>	Oil capacities and WCD are validated using information
☐ Articulated Tug and Barge (carrying oil as cargo)	on the Coast Guard Vessel Response Plan web site.
☐ Gas Carrier	OH CHI I DECRONSE COVEDACE.
□ Passenger Vessel	OIL SPILL RESPONSE COVERAGE: USCG Vessel Response Plan (VRP) Control No.:
□ Container Ship	
□ Ro/Ro	Washington State Approved Oil Spill Vessel Response Plan:
□ Car Carrier	□ Vessel/Company Plan
☐ Bulk Carrier	☐ Washington State Maritime Cooperative Plan
<ul><li>□ Break Bulk Cargo Carrier</li><li>□ Towing Vessel</li></ul>	☐ National Response Corporation Plan
☐ Fishing Industry Vessel	Vessel's P&I Club or Insurer:
☐ Other (describe):	
	Qualified Individual Provider listed in VRP:
Ship Owner/Operator Company Name:	Company Name: Qualified Individual Name (if applicable):
Owner/Operator Mailing Address:	Qualified marvidual realite (it applicable).
	Qualified Individual 24/7 Phone Number:
Owner/Operator Telephone No.:	Information on which ERS/ERTV Fee Credits may apply:
Owner/Operator Facsimile No.:	Hwgri'c pnir t qvgevkqp<
Owner/Operator Email Address:	Does vessel have double hull fuel tanks per
	Regulation 12a?
	□ Yes □ No
Authorized Agent Company (if other than Owner/Operator)	Rt qr wnlqp<
Name of Authorized Agent:	Vessel has totally independent <u>Dual Propulsion</u> ?
Authorized Agent Address:	□ Yes □ No
Authorized Agent Address.	<ul> <li>Uchgv( 1Gpxkt qpo gpvcrlU( uvgo u'Egt vklkecvkqp&lt;</li> </ul>
	ISO 14001: ☐ Yes ☐ No
Authorized Agent Telephone No.:	ECOPRO (applies to tank vessels):   Yes   No
Authorized Agent Facsimile No.:	Other:
Authorized Agent Email Address:	
	For ERS/ERTV CG (Marine Exchange) use
	Non-tank vessel first annual transit fee: \$
	Non-tank vessel general transit fee: \$
	Tank vessel transit fee: \$
	1 and vessel transitiee. \$