

Coos Bay Response Cooperative (CBRC)
PO Box 1135, Coos Bay, OR 97420
Phone No.: 541-297-5190

CBRC ARRIVAL NOTICE

Coos River Bay and Estuaries

To obtain coverage under the CBRC Vessel Response Plan (the "Plan"), this form must be submitted to CBRC via e-mail at coosbayresponse@outlook.com at least 48 hours prior to Vessel's arrival into the Area of Coverage, which begins at the jetty mouth of the Coos River. The Owner/Operator/Agent is responsible for paying vessel fees for enrollment under the Plan. THIS FORM MUST BE FULLY AND ACCURATELY COMPLETED.

NOTE: UNDER THE PLAN, THE CBRC FIELD GUIDE IS REQUIRED TO BE ONBOARD.

The undersigned, with authority to bind the Owner, hereby makes the following verifications and commitments and authorizes CBRC to make the same on behalf of the Owner in a binding agreement:

- Verifies acceptance of the Plan and commits to a safe and immediate response to spills in Oregon;
- Commits to having an incident commander in the state within six hours after notification of a spill;
- Commits to the implementation and use of the Plan during a spill; and
- Verifies authority and capability of the plan holder to make necessary and appropriate expenditures in order to implement plan provisions.

Signature _____

Vessel Enrollment or

Printed Name _____

Blanket Enrollment or

Position _____

Enrollment Renewal

Basic Vessel Information

Vessel Name: _____ Flag: _____

Total Petroleum Cargo Onboard: _____ (bbls)

Owner/Operator: _____

Total Petroleum Cargo Tank Capacity: _____ (bbls)

IMO/Official No.: _____

Total Fuel Capacity: _____ (bbls)

Gross Reg. Tons ("GRT"): _____

Last Port: _____

Vessel Agent Information:

Agent: _____

Phone 24 hrs: _____

Address: _____

E-Mail Address: _____

Trip and Cargo Information:

ETA: _____

Berth: _____

Cargo to Discharge: _____

Cargo to Load: _____

ETD: _____

Qualified Individual ("QI") Information

(named in VRP and/or SOPEP):

QI Company: _____

QI Contact (if any): _____

24-Hour Contact No.: _____

USCG Oil Spill Response Organization (OSRO) providing Ocean Coverage:

MSRC _____ NRC _____

Above vessel has been enrolled under the plan by:

Signature _____

Printed Name _____

ISRC for CBRC coosbayresponse@outlook.com
Position _____