

ROPME (SEA AREA) BALLAST WATER REPORTING FORM (RBWRF)

[To be completed (except item 4C) and sent by all vessels BEFORE arriving in Kuwaiti waters. Prior to sailing, item 4C to be filled & original to be handed over to Pilot]



1. VESSEL INFORMATION

Vessel Name:	Type:	IMO Number:
Owner:	GT:	Call Sign:
Last Port and Country:	Flag:	Agent:
Next Port and Country:	Arrival Date:	Arrival Port:

2. BALLAST WATER

Intended Port of discharge of BW:
Specify Units (m ³ , MT, LT, ST):
Total Ballast Water on Board:
Total Ballast Water Capacity:

3. BALLAST WATER TANKS

(A) Is Ballast Water Management Plan available on board (*)	YES <input type="checkbox"/>	NO <input type="checkbox"/>
(C) Total No. of ballast tanks on board		
(E) Total No. of Tanks where ballast exchanged		
(G) If Exchange was not conducted, state other IMO approved control action(s) taken;		
(H) If none, state reasons why not: (****)		

(B) Has this been implemented (*)	YES <input type="checkbox"/>	NO <input type="checkbox"/>
(D) Total No. of Tanks with ballast		
(F) Total No. of tanks not exchanged		

NOTES:
(*) If answer to 3(A) or 3(B) is "No", no de-ballasting allowed, tick items No. 5(B) & 5(C)
(**) If no ballast in tanks, or if no ballast intended to be discharged at Kuwait, tick items No. 5(A) & 5 ©
(****) If Ballast Water could not be exchanged or treated as per IMO regulations, vessels not allowed to de-ballast such tanks, tick items No. 5(B) & 5(C)

4. BALLAST WATER HISTORY:

Record all tanks that will be deballasted in the port of arrival in the State of Kuwait : (If none, please go to item No. 5)

Tanks/Holds 1. Tanks with single source to be listed in the same row 2. Multiple sources separately	(A) BW SOURCE			(B) BW EXCHANGE CARRIED OUT :				(C) ACTUAL DISCHARGE OF BW (This section to be filled-in after deballasting. Signed & stamped copy to be handed over to Pilot before sailing)					
	DATE ddmmyy	PORT or Lat / Long	VOLUME (units)	TEMP (units)	DATE ddmmyy	ENDPOINT Lat / Long	VOLUME (units)	% Exch.	SEA Hgt. (m)	DATE ddmmyy	PORT or Lat / Long	VOLUME (units)	SALINITY (units)

Ballast Water Tank Codes: Forepeak=FP, Aftpeak=AP, Double Bottom=DB, Wing=WT, Topside=TS, Cargo Hold=CH, O=Other

5. IS THE BALLAST WATER MANAGEMENT -
IMPLEMENTED CORRECTLY:

(A) YES	
(B) NO	
(C) No de-ballasting operation in Kuwait	

Master's Name:	Ship's Stamp
Signature	
Date:	

(For KOC Marine Opms use only)	
If item 5(B) is ticked, HM to inform Govt Surveyor, record his action, sign and send the form to TLMO, without delay	
Govt. Surveyor Name:	HM Name:
Govt. Surveyor Action:	HM Signature:
Date:	Date:

PROCEDURE:
Before Arrival into Kuwaiti Waters:
1. Master to send completed form (except item 4C) to Agent
2. Agent to send the completed form to HM
3. For complying vessels - HM to send all completed forms to Marine with month-end papers
Unauthorized discharge of BW
6. If there is evidence of unauthorized discharged of BW, HM to immediately inform TLMO, TL-HSE-E&M, Agent & Govt. Surveyor who will initiate appropriate proceedings
7. HM to record G. Surveyor action & send the form to TLMO After deballasting:
8. Master to complete item 4(C) and handover the signed & stamped form to Pilot before sailing