



Crouch Harbour Authority Waste Management

Name of ship: _____ Estimated time of departure: _____
 Call Sign: _____ Previous port of call: _____
 IMO Number: _____ Next port of call: _____
 Flag state: _____ Last port & date when ship-generated waste was delivered: _____
 Estimated time of arrival: _____ Are you delivering All Some None
 (x) Of waste into port reception facilities?

If delivering all waste, complete second column as appropriate.

If delivering some or no waste, complete all columns.

Type	Waste to be delivered (m3)	Maximum dedicated storage capacity (m3)	Amount of waste retained on board (m3)	Port at which remaining waste will be delivered (m3)	Estimated amount of waste to be generated between notification & next port of call (m3)
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1. Waste oils

Sludge					
Bilge water					
Other (Specify)					

2. Garbage

Food waste					
International food waste (ICW)					
Plastic					
Other (Specify)					
3. Cargo-associated waste (Specify) (1)					
4. Cargo residues (specify) (1)					

(1) May be estimates

Notes:

1. This information may be used for port state control & other inspection purposes.
2. Member states will determine which bodies will receive copies of this notification.
3. This form is to be completed unless the ship is covered by an exemption in accordance with Article 9 of Directive 2000/59/EC.

I CONFIRM THAT:

The above details are accurate, correct and that there is sufficient dedicated onboard capacity to store all waste generated between notification and the next port at which waste will be delivered.

Date: _____

Time: _____

Signature: _____