# MASTER’S INFORMATION

# DECK DEPARMENT

## GENERAL INFORMATION

a) Ship’s name:

b) Owners:

c) Managers:

d) Office contact/Designated person:

e) Expected trading area:

f) Period under present management (in years):

## RECORDS

Are the following records available on board (circle answer)?

a) Crew’s medical certificates? Yes/No

b) Crew’s on board training? Yes/No

c) Ship’s history of damage? Yes/No

d) Maintenance routines? Yes/No

e) Latest “Listing of Surveys”? Yes/No

f) Latest thickness measurement report? Yes/No

Are the following instructions/routines implemented on board (circle answer)?

a) Pre-loading instructions? Yes/No

b) SOPEP? Yes/No

c) Vessel Response Plan (VRP)? Yes/No

d) Bunkering instructions? Yes/No

e) Routines concerning visitors? Yes/No

f) Stowaway prevention policy? Yes/No

g) Pre-departure instruction? Yes/No

h) Cargo sampling routines? Yes/No

i) Dangerous cargo endorsement? Yes/No

j) Cargo securing instructions? Yes/No

k) Cargo monitoring routines? Yes/No

l) Drug and alcohol policy? Yes/No

m) Smoking regulations? Yes/No

## SAFETY MANAGEMENT SYSTEM – SMS (ISM)

a) Have you received training on SMS? Yes/No

b) Name of governing body:

c) Date for implementation:

d) Date for last external audit:

e) Date for last internal audit:

f) Date for last master’s review:

## CREW

a) Number and nationality of crew:

b) Common working language:

c) Are all crew fully familiar with the procedures in which they are involved? Yes/No

d) Do you have procedures for crew shipboard familiarisation? Yes/No

e) Do you have procedures for competence evaluation of your crew? Yes/No

f) Is there a training programme for all crew? Yes/No

## SAFETY DRILLS AND INSPECTIONS

When were the below items last checked for functionality

a) Portable fire extinguishers:

b) Fixed system firefighting: .......................................................................

c) Fire and vent flaps: .......................................................................

d) Emergency fire pump .......................................................................

e) Fireman’s outfit:.......................................................................

f) Emergency generator:

g) Emergency batteries:

h) Emergency steering:

i) Life boat engines:

j) Remote stops and shutdowns:

k) Quick closing valves:

l) Bilge alarm and pumping system:

m) Date for last fire drill:

n) Date for last lifeboat drill:

o) Date for last lowering of life boat:

p) Date for last foam analysis:

q) Date for last service of breathing apparatus:

## NAVIGATION/COMMUNICATION

a) Is all navigational equipment in good working order? Yes/No

b) Is all communication equipment in good working order? Yes/No

c) Are all charts corrected? Yes/No

## SHIP CONDITION

a) Have you inspected the ship in order to ascertain Sea- and cargo-worthiness? Yes/No

b) If yes, when and where :

c) Have you or the owners made a maintenance plan for the ship? Yes/No

## INSURANCE

a) Hull & Machinery policy on board? Yes/No

b) Hull & Machinery instructions on board? Yes/No

c) Protection & Indemnity policy on board? Yes/No

d) Protection & Indemnity instructions on board? Yes/No

# ENGINE DEPARTMENT

## GENERAL INFORMATION (TYPE AND MAKE)

a) Main engine(s):

b) Turbo charger(s):

c) Auxiliary engines:

d) Main boiler(s):

e) Auxiliary boiler(s):

f) Exhaust boiler/economiser:

g) Bow thruster(s):

h) Propeller (type, no of blades) :

i) Shaft generator:

j) Fire protection system:

## RECORDS

a) Crank shaft deflections Yes/No

b) Bearing clearances Yes/No

c) Cylinder liner wear Yes/No

d) Fuel oil and lube oil analysis Yes/No

e) Boiler water treatment Yes/No

f) Cooling water treatment Yes/No

g) Insulation test of electrical equipment Yes/No

h) Garbage log Yes/No

i) Oil record book Yes/No

## INSTRUCTIONS AND ROUTINES

Are the following instructions/routines implemented on board?

a) Securing of spare parts Yes/No

b) Bunker instructions Yes/No

c) Hot work permit Yes/No

d) Chief engineer standing order Yes/No

## ENGINE CREW

a) Are all crew fully familiar with the procedures in which they are involved? Yes/No

b) Is the chief engineer approved by class to do survey of engine items? Yes/No

## INSPECTIONS

a) Are engine room bilges clean and free of oil? Yes/No

b) Have you or the owners made a maintenance plan for the ship? Yes/No

c) Is the bilge oily water separator/filtering system in good working order? Yes/No

## SPARE PARTS

a) PMS type and approval date:

## MISCELLANEOUS

a) Incinerator in use Yes/No

## NOTES/REMARKS

Date: Master’s name:

Signature:

Date: Chief Engineer’s name:

Signature: