Appendix 4: Form 1

Form 1 is used to determine and record whether the inspection is a *passed inspection* or a *failed inspection*.

Contact details (to be completed by vessel operator)

|  |  |  |
| --- | --- | --- |
| 1. | Vessel name, IMO number, vessel type (e.g. fishing, cruise, yacht), displacement, length, breadth, draft: |  |
| 2.  | Date and location of inspection: |  |
| 3. | Inspecting company, representative and contact details: |  |
| 4. | Vessel captain or crew representative and contact details: |  |

Maintenance and travel history (to be completed by vessel operator)

|  |  |  |
| --- | --- | --- |
| 5. | Type of anti-fouling system that has been applied, and the manufacturer's timeframe for effectiveness of that anti-fouling system: |  |
| 6. | Date and location of the last application of the anti-fouling system:  |  |
| 7. | Date and location of last in-water or out-of-water inspection, brief description of results and treatment undertaken: |  |
| 8. | Ports and countries visited in the past 3 months or since past anti-fouling system application (whichever was more recent): |  |

|  |  |  |  |
| --- | --- | --- | --- |
| AREA INSPECTED (Hull area or niche area – add/delete as appropriate for the vessel) | LOCATION ON VESSEL | INSPECTION RESULTSTick one column, as appropriate | RE-INSPECTION RESULTS (if applicable)Tick one column, as appropriate |
|  |  | No biofouling observed in exceedance of the biofouling threshold in Performance Standard 1.1ORIt was not practicable to inspect the niche area*(Inspection Pass)* | Biofouling was observed in exceedance of the biofouling threshold in Performance Standard 1.1 but has been removed*(Inspection Pass)* | Macro-fouling observed in exceedance of the biofouling threshold in Performance Standard 1.1*(Inspection Fail)* | No biofouling observed in exceedance of the biofouling threshold in Performance Standard 1.1ORIt was not practicable to inspect the niche area*(Re-Inspection Pass)* | Biofouling was observed in exceedance of the biofouling threshold in Performance Standard 1.1 but has been removed*(Re-Inspection Pass)* | Macro-fouling observed in exceedance of the biofouling threshold in Performance Standard 1.1*(Re-inspection Fail)* |
| Vertical stern transects | Port |  |  |  |  |  |  |
| Starboard |  |  |  |  |  |  |
| Horizontal transects(Stern)(Amidship)(Bow) | Port |  |  |  |  |  |  |
| Starboard |  |  |  |  |  |  |
| Port |  |  |  |  |  |  |
| Starboard |  |  |  |  |  |  |
| Port |  |  |  |  |  |  |
| Starboard |  |  |  |  |  |  |
| Rudder and shaft  |  |  |  |  |  |  |  |
| Propeller and shaft |  |  |  |  |  |  |  |
| Anodes | Port |  |  |  |  |  |  |
| Starboard |  |  |  |  |  |  |
| Dry dock support strips | Port |  |  |  |  |  |  |
| Starboard |  |  |  |  |  |  |
| Flat bottom |  |  |  |  |  |  |
| Sea chest gratings | Port |  |  |  |  |  |  |
| Starboard |  |  |  |  |  |  |
| Sea chest(s) (out-of-water inspection only) | Port |  |  |  |  |  |  |
| Starboard |  |  |  |  |  |  |
| Intake/overflow gratings | Port |  |  |  |  |  |  |
| Starboard |  |  |  |  |  |  |
| Bilge keels | Port |  |  |  |  |  |  |
| Starboard |  |  |  |  |  |  |
| Damaged paint surfaces | Port |  |  |  |  |  |  |
| Starboard |  |  |  |  |  |  |
| Opportunistic collections (outside of transects/niche areas) | (Note location)1.2.Etc. |  |  |  |  |  |  |

I have conducted an inspection of the subject vessel on ……*(insert date)*…………………….and I certify that the vessel has:

1. Passed the inspection

 OR

1. Failed the inspection on the basis recorded in the “Inspection Fail” column above.

*(delete one as applicable)*

Signed……………………………………… Date…………………………………………….

In the event that b) applies, the inspector is to complete the following:

I have completed re-inspection(s) on *……(insert date(s) of re-inspection(s))……* of the areas of the vessel that failed the original inspection on *……(insert date of original inspection)…………..* and I certify that the vessel has:

1. Passed the re-inspection

OR

1. Failed the re-inspection(s) on the basis recorded in the “Re-inspection(s) Fail” column above.

*(delete one as applicable)*

Signed……………………………………….. Date………………………......................

Note: If more than one re-inspection is carried out, a record of each re-inspection is to be maintained. Please adapt Form 1 accordingly.