

## Port of Southampton Competent Harbour Authority

### Pilotage Incident Report

**Type of Incident** *(delete as appropriate)*

- A Collision / Close Quarter Situation                      yes / no  
 B Grounding    yes / no  
 C Loss of anchor    yes / no  
 D Other (specify)

Sir,

I, \_\_\_\_\_ have to report that the vessel in my charge within the Port of Southampton Competent Harbour authority Pilotage Area, was involved in an incident, identified above, as described hereunder:

1	Ship's Name			1	
2	Owners			2	
3	Agent			3	
4	GRT/NRT			4	
5	Length overall in metres			5	
6	Beam in metres			6	
7	Draught in metres			7	
8	Last Port of call			8	
9	Destination in CHA Pilotage area			9	
10	Main engine propulsion (diesel / steam / gas)			10	
11	Bow / stern thrusters fitted			11	
12	Machinery defects (state)			12	
				12	
13	Unusual handling characteristics (state)			13	
				13	
14	Date of occurrence (day / date / month / year)			14	
15	Time (local) <i>(use 24 hour clock)</i>			15	
16	Predicted tide time / height	HW	m	Soton / P'mouth	16
	<i>(1<sup>st</sup> High only)</i>	LW	m	Soton / P'mouth	16
17	Set / rate of tide at time of incident				17
18	Wind direction / speed				18
19	Sea state <i>(use Beaufort scale)</i>				19
20	Visibility <i>(in miles)</i>				20
21	Name of other vessel / object involved				21
22	Place of incident				22
23	Position of incident, by bearing / distance from				23
	<i>(select well known datum)</i>				23
24	How was position obtained				24
25	Ship's heading at time of incident				25
26	Echo sounder in use			Yes / no	26
27	Sounding trace retained <i>(if no, why?)</i>			Yes / no	27
28	Type of lookout maintained				28
29	Was radar watch being kept			Yes / no	29
	<i>(if yes what mode?)</i>				29

30	Speed at time of incident		30
31	Engine(s) setting		31
32	Bridge control	Yes / no	32
33	Bow / stern thruster in use	Yes / no    Setting	33
34	Cmpmp[ass in use (Mag/Gyro/solid state)		34
35	Tugs in use at time of incident	Yes / no	35
36	Names of tugs / position		36
			36
			36
37	Time incident first reported		37
	To whom / method		37
38	Estimated course and speed of other vessel		38
39	Name of other vessel		39
40	Lights / signals displayed ( <i>own ship</i> )		40
			40
41	Lights / signals displayed ( <i>other ship</i> )		41
			41
42	Sound signals ( <i>own</i> )		42
43	Sound signals ( <i>other</i> )		43
44	VHF used prior to incident	Yes / no	44
	VHF R/T Channel		44
45	Was a dangerous substance being carried	Yes / no	45
46	Damage to own ship		46
47	Damage to other ship or objects		47
48	Injuries		48
49	Action taken after incident		49
50	Written statement from Master	Yes /no	50
	<i>If yes please provide original</i>		50
51	How did the incident occur – describe in your own words supported by any chart, drawing, sketch, photograph or other evidence that may assist the investigating panel in their findings. Use separate sheets of blank paper for continuation pages.		

----- Signature

----- Name ----- Date

Authorised Pilot / Pilot Exemption Certificate Holder (*delete as appropriate*)

Certificate  
number -----

To be forwarded to the Harbour Master, Associated British Ports, Southampton