

7.3 Marine Incident Report (form F3071)

Marine Incident Report



This form is to be completed by the ship Owner or Master at the time of the incident and returned, with all supporting documents, to your local Maritime Safety Queensland regional office or Queensland Police Service (Water Police) or Queensland Boating and Fisheries Patrol Office.

Incident description					
Position of incident					
Latitude	Longitude	Body of water/Landmark	Bearing	Distance	
° 'S	° 'E				
Location			Date	Time	
<input type="checkbox"/> Inland waters	<input type="checkbox"/> Smooth waters	<input type="checkbox"/> Partially smooth waters	<input type="checkbox"/> Offshore	/ /	am pm
Type of incident					
<input type="checkbox"/> Collision	<input type="checkbox"/> Grounding	<input type="checkbox"/> Loss of ship	<input type="checkbox"/> Onboard incident		
<input type="checkbox"/> between ships	<input type="checkbox"/> unintentional	<input type="checkbox"/> Structural failure	<input type="checkbox"/> falls within ship		
<input type="checkbox"/> with a fixed object	<input type="checkbox"/> intentional	<input type="checkbox"/> Loss of stability	<input type="checkbox"/> crushing or pinching		
<input type="checkbox"/> with floating object	<input type="checkbox"/> Capsizing	<input type="checkbox"/> Fire	<input type="checkbox"/> other onboard injury		
<input type="checkbox"/> with an animal	<input type="checkbox"/> sinking	<input type="checkbox"/> Explosion	<input type="checkbox"/> Other personal injury		
<input type="checkbox"/> with overhead obstruction	<input type="checkbox"/> swamping	<input type="checkbox"/> Person overboard	<input type="checkbox"/> hit by propeller or ship		
<input type="checkbox"/> with submerged object	<input type="checkbox"/> flooding		<input type="checkbox"/> water ski incident		
<input type="checkbox"/> with wharf			<input type="checkbox"/> parasailing incident		
			<input type="checkbox"/> diving incident		
			<input type="checkbox"/> other personal injury caused by operation of ship		
Incident Severity Rating					
No. of ships involved	<i>Note - if more than 2 ships were involved attach details on a separate sheet</i>				
<input type="checkbox"/> Fatality	<input type="checkbox"/> Injury	<input type="checkbox"/> Ship lost	<input type="checkbox"/> Damage to property only		
No. of persons	No. of persons	<input type="checkbox"/> Ship damaged	<input type="checkbox"/> No damage		
Environmental Conditions					
Weather			Visibility		
<input type="checkbox"/> Clear	<input type="checkbox"/> Hazy	<input type="checkbox"/> Cloudy	<input type="checkbox"/> Rain	<input type="checkbox"/> Flood	<input type="checkbox"/> Other
<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor			
Water conditions					
<input type="checkbox"/> Calm	<input type="checkbox"/> Choppy	<input type="checkbox"/> Rough	<input type="checkbox"/> Very Rough	<input type="checkbox"/> Strong current	
Time of day					
<input type="checkbox"/> Day	<input type="checkbox"/> Night	<input type="checkbox"/> Twilight			
Wind speed					
<input type="checkbox"/> None	<input type="checkbox"/> Light (up to force 2 / 1-7 knots)	<input type="checkbox"/> Moderate (force 3-4 / 8-16 knots)			
<input type="checkbox"/> Strong (force 5-7 / 17-33 knots)	<input type="checkbox"/> Gale (force 8 and above / more than 33 knots)				
Wind direction					
Wind coming from					
Ships involved					
Own ship			Other ship		
Ship owner's details			Ship owner's details		
Owner's name			Owner's name		
Telephone (business hours)			Telephone (business hours)		
Telephone (after hours)			Telephone (after hours)		
Address			Address		
Ship details			Ship details		
Name of ship			Name of ship		
Official Registration no.			Official Registration no.		
Registering Authority			Registering Authority		
Length (metres)			Length (metres)		
Beam (metres)			Beam (metres)		
Year built			Year built		
No. of passengers on board			No. of passengers on board		
No. of crew on board			No. of crew on board		

Page 1 of 4
SSA Multimedia Services
Form F3071 ES
V01 July 2009
Continued over page ...

Ships involved - continued

Own ship

Type

- passenger PWC (jetski) sailing boat
 non passenger motorboat houseboat
 fishing speedboat rowing boat
 hire & drive speedboat (planing hull) catamaran

Other (describe)

Commercial USL Class Recreational
 Fishing

Engine

- Outboard Inboard/Outboard
 Inboard Petrol None
 Inboard Diesel Other (please specify)

No. of engines Engine power

 HP
KW

Hull material

- Steel Ferro-cement
 Fibreglass/GRP Timber
 Marine alloy

Other (describe)

Damage to ship

- Lost Moderate damage (damaged but ship remains seaworthy)
 Major damage (ship unseaworthy) No damage

Other ship

Type

- passenger PWC (jetski) sailing boat
 non passenger motorboat houseboat
 fishing speedboat rowing boat
 hire & drive speedboat (planing hull) catamaran

Other (describe)

Commercial USL Class Recreational
 Fishing

Engine

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 Inboard Diesel Other (please specify)

No. of engines Engine power

 HP
KW

Hull material

- Steel Ferro-cement
 Fibreglass/GRP Timber
 Marine alloy

Other (describe)

Damage to ship

- Lost Moderate damage (damaged but ship remains seaworthy)
 Major damage (ship unseaworthy) No damage

Persons involved

Own ship

Deceased or injured persons

Name of deceased or injured person

Gender Date of birth

Male Female / /

Address

Telephone (business hours) Telephone (after hours)

Injury status

- Fatality Missing person
 Serious injury Minor injury (not requiring hospital treatment)

Activity of injured or deceased

- Person in charge (Master) Jet-skier
 Person at helm Surf ski/surf board rider
 Crew Swimmer
 Passenger on vessel Diver
 Water-skier Other
 Para-flier

Other ship

Deceased or injured persons

Name of deceased or injured person

Gender Date of birth

Male Female / /

Address

Telephone (business hours) Telephone (after hours)

Injury status

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Page 2 of 4
SSA Multimedia Services
Form F3071 ES
V01 July 2009

Continued
next page . . .

Persons involved - continued

Own ship

Masters details

Master's name

Gender

Male Female

Date of birth

 / /

Licence type and grade (e.g. Master 5)

Licence no.

Issuing Authority

Issue date

 / /

Expiry date (if applicable)

 / /

Address

Telephone (business hours)

Telephone (after hours)

Watchkeeper / Person at the helm

Role

Master Crewmember Passenger

Name

Gender

Male Female

Date of birth

 / /

Licence type and grade (e.g. Master 5)

Licence no.

Issuing Authority

Issue date

 / /

Expiry date (if applicable)

 / /

Address

Telephone (business hours)

Telephone (after hours)

Other ship

Masters details

Master's name

Gender

Male Female

Date of birth

 / /

Licence type and grade (e.g. Master 5)

Licence no.

Issuing Authority

Issue date

 / /

Expiry date (if applicable)

 / /

Address

Telephone (business hours)

Telephone (after hours)

Watchkeeper / Person at the helm

Role

Master Crewmember Passenger

Name

Gender

Male Female

Date of birth

 / /

Licence type and grade (e.g. Master 5)

Licence no.

Issuing Authority

Issue date

 / /

Expiry date (if applicable)

 / /

Address

Telephone (business hours)

Telephone (after hours)

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Privacy Statement

The Department of Transport and Main Roads is collecting the information on this form to assist in the management of investigations into marine incidents and provide reports on marine incidents to the Minister for Transport. This information is required under the *Transport Operations (Marine Safety) Act 1994*. Your personal information will not be disclosed to any other third party without your consent or unless required to do so by law.

Report details

A *full description* (including a diagram or chart extract) of the incident and events leading up to the incident are to be detailed in the space provided below (If insufficient space, please use separate pages, each extra page that is used is to be signed.)

Owner/Master's Report

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Assistance rendered/received at incident

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Signature (Owner/Master) _____ Date ____/____/____

Name (please print) _____

Name and Status of person who assisted in completion of form (if applicable) _____

Page 4 of 4
SSA Multimedia Services
Form F3071 ES
V01 July 2009