

VESSELS OF OPPORTUNITY

Enrollment Form

Full name: _____		
Email: _____		
Address: _____		
(street)		
_____	_____	_____
(city)	(state)	(zip code)
Primary phone number: _____		
VOO region of your homeport area (see page 4): _____		
Address where the vessel is normally located: _____		
	(street)	
_____	_____	_____
(city)	(state)	(zip code)

I am registering a:

- Commercial Vessel
- Recreational Vessel

Name of vessel: _____

Length of vessel (in feet): _____

Year, make, and model of vessel: _____

Vessel's Lloyds Registry and/or International Maritime Organization (LR/IMO) number or official number:

Vessel engine type and horsepower: _____

Hull construction:

- Metal
- Fiberglass
- Wood
- Other: _____

Date of most recent marine survey (*if you've never had a marine survey, mark "never"*): _____

Date of most recent USCG compliance inspection or boarding:

- Date of inspection or boarding: _____.
- Never had an inspection.
- Unknown.
- Not applicable, I have a recreational vessel.

Expiration date of USCG "Certificate of Compliance of Inspection", or "Fishing Vessel Safety Examination" decal:

- Expiration date: _____.
- Never obtained one.
- Unknown.
- Not applicable, I have a recreational vessel.

Vessel insurance information and coverage plan:

Vessel crew training records relevant to oil spill response. (*Check all that apply.*)

- 8 hour HAZWOPER. Completion date: _____
- 16 hour HAZWOPER. Completion date: _____
- 24 hour HAZWOPER. Completion date: _____
- 40 hour HAZWOPER. Completion date: _____
- None

Select the maximum distance from shore you intend to operate:

- 1 mile
- 2 miles
- 5 miles
- >5 miles

Number of passengers certified to carry (*if applicable*):

- 1
- 2-5
- 5-10
- 10-20
- Not applicable

Number of berths:

- 1
- 2-3
- 4-6
- 7-10
- None

Does the vessel have an installed toilet?

- Yes
- No

Seasonal operations of the vessel. Please describe your availability. (For example, "in Puget Sound 9 months of the year and 3 months in Alaska"): _____

Is there a drug testing program for captain and crew?

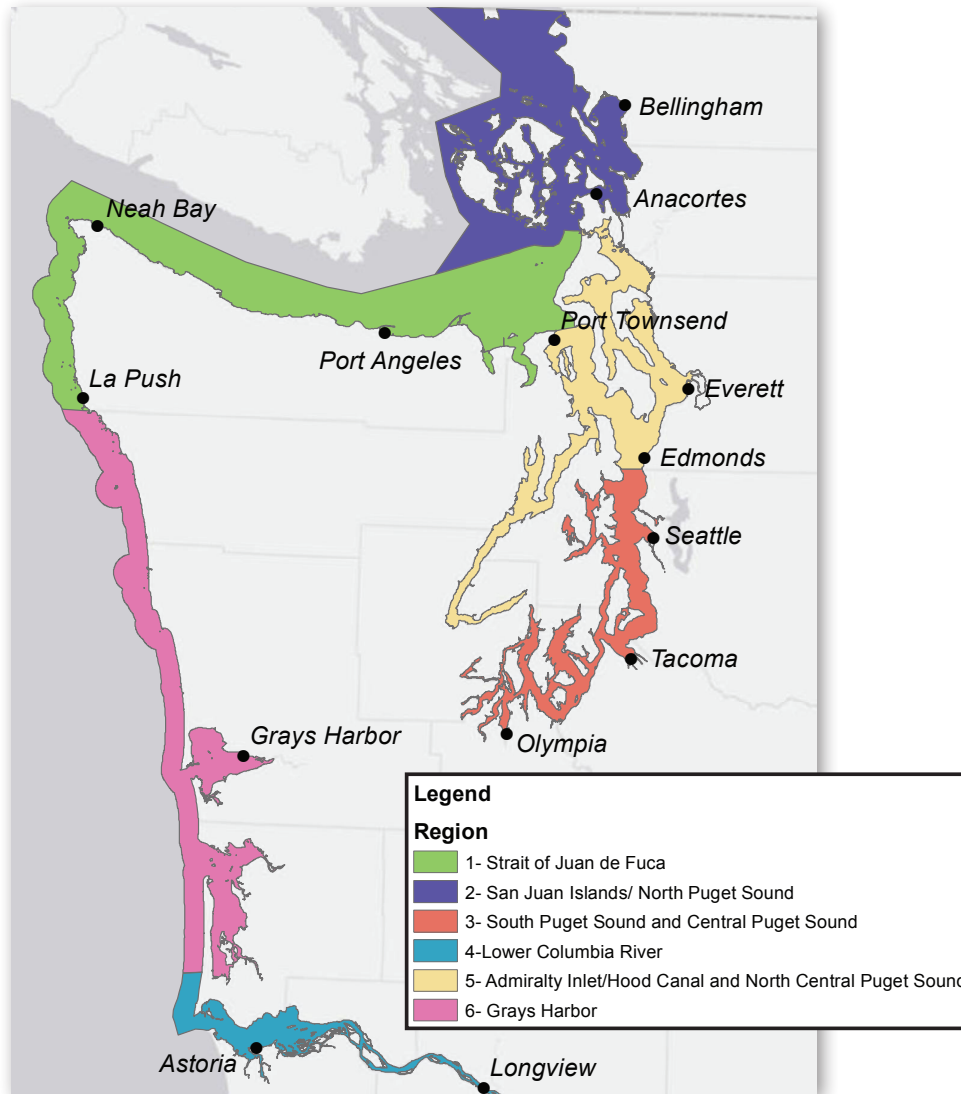
- Yes. Please describe: _____
- No

Are you currently contracted to a Washington State approved Primary Response Contractor (PRC)?

- Yes. If so, which one:
 - Marine Spill Response Corporation (MSRC)
 - National Response Corporation (NRC)
 - Other: _____
- No

VOO Regions

VOO regions cover all marine waters of Washington State. Use this map to identify your VOO region. Locate your homeport on the map, then use the legend to find which VOO region it falls under.



Mail your completed enrollment form to:

Washington Department of Ecology
Spill Prevention, Preparedness, and Response Program
PO Box 47600
Olympia, WA 98504-7600

If you have questions about this form, please contact Brian MacDonald at 360-742-8781 or brian.macdonald@ecy.wa.gov.

Special Accommodations:

To request this document in a format for the visually impaired, please call the Ecology Spills Program at (360) 407-7455. Persons with impaired hearing may call Washington Relay Service at 711. Persons with speech disability may call TTY at 877-833-6341.