## **Bunker Transfer Compliance Declaration Form**

## **Vessel & Bunker Details** Vessel Name **IMO Number Bunker Supplier Date of Transfer** Location Type of Bunker Fuel Quantity (MT) **Transfer Operations Start Time End Time** Receiving Tank(s) **Transfer Method Compliance Checks** All valves, hoses, and pipelines have been checked and are in good order • Drip trays and scuppers in place and free of oil Spill response equipment available Communication between vessels established **Additional Remarks** Remarks

Name of Responsible O	fficer		
Signature			
Date			