

Offshore Supply Vessel Pre-Departure Checklist

Vessel & Crew Details

Vessel Name	
IMO Number	
Master's Name	
Date & Time	
Departure Port	
Destination	
Number of Crew	

Checklist Items

	Item	Notes
<input type="checkbox"/>	Navigation & Communication Equipment Checked	
<input type="checkbox"/>	Main Engines & Generators Operational	
<input type="checkbox"/>	Safety Equipment Inspected	
<input type="checkbox"/>	Firefighting Equipment Ready	
<input type="checkbox"/>	Deck Cargo Secured and Inspected	
<input type="checkbox"/>	Stability and Ballast Checked	
<input type="checkbox"/>	Pollution Prevention Systems in Place	
<input type="checkbox"/>	Crew Briefed & Mustered	
<input type="checkbox"/>	Medical Supplies Available	
<input type="checkbox"/>	Logbooks Updated	

Additional Notes

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Master's Signature	
Date	

