

Vessel Collision Incident Report

Date of Incident

Time of Incident

Location

Vessel Name 1

Vessel Name 2

IMO/MMSI Number (Vessel 1)

IMO/MMSI Number (Vessel 2)

Vessel Type (1)

Vessel Type (2)

Master/Person in Charge (Vessel 1)

Master/Person in Charge (Vessel 2)

Brief Description of Incident

Weather and Sea Conditions

Injuries (if any)

Damages (if any)

Witnesses (Names, Contact)

Actions Taken Immediately After Incident

Reported By

Date of Report