

Garbage Disposal at Sea Incident Form

Vessel Name	<input type="text"/>
IMO Number	<input type="text"/>
Date of Incident	<input type="text"/>
Time of Incident	<input type="text"/>
Location (Latitude/Longitude)	<input type="text"/>
Sea Area	<input type="text"/>
Type of Garbage Disposed	<input type="text"/>
Estimated Quantity (m ³ or kg)	<input type="text"/>
Reason for Disposal	<input type="text"/>
	<input type="text"/>
Actions Taken	
Reported To (Authority/Person)	<input type="text"/>
Date Reported	<input type="text"/>
Remarks	<input type="text"/>