



# PILOT'S REPORT OF INCIDENT

## BOARD OF PILOTAGE COMMISSIONERS

2901 Third Avenue, Seattle, Washington 98121

(206) 515-3904 FAX (206) 515-3906

DATE: \_\_\_\_\_

**FILE WITH COMMISSION WITHIN 10 DAYS  
ALONG WITH THE VESSEL CERTIFICATION FORM  
(WHITE CARD)**

A state licensed pilot involved in an incident is required by law to notify the Board of Pilotage Commissioners by telephoning (1-800-627-3924) or radioing (Channel 20) the Marine Exchange of Puget Sound as soon as the situation is stabilized or within one hour of reaching shore. A pilot is also required to complete this form and submit it to the Board of Pilotage Commissioners as soon as possible after the incident, but in no event more than ten days afterwards.

**An incident includes an actual or apparent collision, allision, or grounding. An incident is also a navigational occurrence resulting in actual or apparent personal injury, property or environmental damage.**

|                                                                                              |  |                   |                                                 |                     |                       |
|----------------------------------------------------------------------------------------------|--|-------------------|-------------------------------------------------|---------------------|-----------------------|
| PILOT:                                                                                       |  | STATE LICENSE NO. |                                                 | FEDERAL LICENSE NO. |                       |
| VESSEL                                                                                       |  | FLAG              |                                                 | MASTER              |                       |
| OWNER/AGENT                                                                                  |  |                   |                                                 | OFFICIAL NUMBER     |                       |
| DATE OF INCIDENT                                                                             |  |                   | TIME OF INCIDENT (a.m./p.m.)                    |                     |                       |
| LOCATION (Established by bearings and distance, geographical point, or latitude & longitude) |  |                   |                                                 |                     |                       |
| LENGTH OF VESSEL (LOA)                                                                       |  | BEAM              | DRAFT FORWARD/AFT                               |                     | GROSS TONNAGE (INT'L) |
| WEATHER CONDITIONS (clear, rain, snow, sleet, hail, fog, etc.)                               |  |                   |                                                 |                     |                       |
| VISIBILITY                                                                                   |  |                   | WIND (Direction, velocity, steady, gusty, etc.) |                     |                       |
| TIDAL CONDITIONS                                                                             |  |                   |                                                 |                     |                       |
| NAME OF TUG(S) USED                                                                          |  |                   | TUG MASTER(S)                                   |                     |                       |

**NARRATIVE DESCRIPTION AND CAUSE OF INCIDENT:** Describe the incident, including the chain of events leading to it. Attach additional sheets, as necessary, and complete diagram on reverse.

**NOTE — IN CASE OF GROUNDING, COLLISION or ALLISION:** State all facts, including all necessary time, courses steered (true or magnetic), speed of vessel, compass error if known, ship's heading at time of incident, and navigational instruments used. Include radar, compass, fathometer, GPS, LORAN, etc. If vessel is equipped with radar, state particulars - manufacturer, range used, if operating satisfactorily, who was operating it, and information furnished. Describe all precautions or actions taken to avoid the incident, including soundings, use of electronic navigation equipment, position plotting, and navigation procedures including soundings, whistle echoes and signals where applicable. Describe methods used to refloat the vessel, if applicable. In case of collision or allision, include whistles exchanged, engine orders, and wheel orders.

### NARRATIVE TOPICS TO CONSIDER

- |                                              |                                                        |                                               |
|----------------------------------------------|--------------------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Perceptions         | <input type="checkbox"/> Judgments                     | <input type="checkbox"/> Contributing Factors |
| <input type="checkbox"/> Communications      | <input type="checkbox"/> Ship Configuration or Loading | <input type="checkbox"/> Decisions            |
| <input type="checkbox"/> Language Difficulty | <input type="checkbox"/> Personal Alertness            | <input type="checkbox"/> Actions or Inactions |

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**DESCRIBE ACTUAL OR APPARENT PERSONAL INJURY OR PROPERTY OR ENVIRONMENTAL DAMAGE:**

THIS SPACE TO BE USED FOR DRAWING DIAGRAM OF VESSEL AND OTHER OBSTACLES AT TIME OF INCIDENT.



**DID YOU NOTIFY THE VESSEL MASTER OF YOUR INTENT TO FILE THIS REPORT?**      ☐ **YES**      ☐ **NO**