

RECORD OF HATCH SURVEY




Managers
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All correspondence should be addressed to the Managers

Name of ship	[REDACTED]
Operator	[REDACTED]
Type of ship	<i>Bulk-cargo vessel</i>
Year and country of build	[REDACTED]
Flag	<i>Liberia, port of Reg. Monrovia</i>
Gross tonnage	[REDACTED]
Classification Society	<i>China Classification Society (CCS) + RINA</i>

Date(s) and place(s) of survey	Date	Place
	[REDACTED]	<i>Batu Ampar port</i>
	<i>[Signature]</i>	<i>Batam island, Indonesia</i>
Name of Survey Company <i>CISS GROUP Pte. Ltd.</i>		
Name of Surveyor <i>Dmytro FILIPCHYK</i>		

Jan-14



Form SHIP 1

GUIDELINES FOR HATCH SURVEYS PRIOR TO LOADING STEEL

GENERAL GUIDANCE FOR HATCH SURVEYS

- 1 The Surveyor should make his presence on board known to the Master, or his representative, before starting the survey.
- 2 Surveyors are reminded that they should at all times observe local port/terminal and ship's safety regulations. In the absence of such regulations the Surveyor shall carry out the survey following best safety practices.
- 3 Surveyors should always request to be accompanied by a ship's officer during their survey and also allow Owner's representatives to accompany them, if requested.
- 4 A sufficient number of labelled digital colour photographs of deficiencies and general aspects of the ship are required.

HATCH SURVEY - REPORTING

- 5 Surveyors should make a detailed examination of the ship and question the ship's staff in order to complete the attached Club forms "Ship 1", "Ship 3" and any "HC Form(s)".
- 6 The Club requires a weathertightness check of the hatch covers. The method of checking must be reported.
 - The preferred method of testing is by ultra-sound. [The equipment should be Class approved (e.g. manufactured by SDT/MacGREGOR) and the operator certificated to use it. If Class approved equipment is not available other types may be used. However, the type used must always be reported.]
 - Where ultra-sound testing is not possible then a water hose test [to class requirements] should be used, but **NOT** if some cargo is already in the hold.
 - Where no other test method is practical, a chalk test should be performed.
- 7 Deficiencies should be reported to the Master, who should be asked for his intentions to remedy them. The deficiencies should also be reported on "HC Forms" and separate sheets, as required. **"Urgent" matters should be reported verbally.**
- 8 **The Surveyor should inform the Master that the Club requires that hold openings be made weathertight prior to the application of any additional sealing methods (e.g. sealing tape, foam, cement or non-class approved systems).**
- 9 Preliminary advice, detailing the deficiencies and the Master's intentions to remedy them, must be prepared and promptly forwarded to the Club and the Owner. The Master should sign this advice and also be given a copy.
- 10 The Surveyor should re-attend to verify remedial action and weathertightness, if necessary. Updated reports are to be sent accordingly.
- 11 One copy of the full report (attached forms Ship 1, Ship 3, any HC Forms / deficiency sheets and the written report) together with the colour photographs should be forwarded by e-mail as attachments to the Club, as soon as possible.

SHIP 2

DEFICIENCY RECORD FOR HATCH COVERS, COAMINGS, ACCESSES & VENTS

(COMPLETE THIS PAGE ONLY IF THERE ARE DEFICIENCIES TO REPORT)

THEY SHOULD BE FORWARDED WITH THE DEFICIENCY LIST AND A COPY LEFT WITH THE MASTER)

HATCH NO: <u>1</u> <small>(One page per hatchway - Handwritten only)</small>	PORT/CENTRE/STBD* <small>* Delete as necessary</small>	SHIP [REDACTED]
		DATE [REDACTED]

IF APPROPRIATE SHOW RELATIVE POSITION OF HATCH PANEL JOINTS, ACCESSES & VENTS

FWD

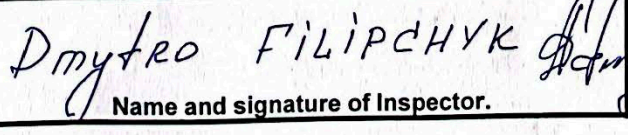
PORT
STBD

CROSS-REFERENCE TO QUESTION(S) 46, 47, 59, 60, 61, 62, 63, 64, 65, 66 & 67 *

TEST METHOD ULTRA-SOUND / HOSE / CHALK / NONE* Note: If ultra-sound test was used a separate report is required.
 by HATCTITE Ultrasonic / Martek - Marine

WAS INSPECTION INCOMPLETE DUE TO OPERATIONAL REASONS? -YES/NO*

LEAKAGE AREA	L	SEAL PACKING DEFECTIVE	S
COMPRESSION BARS DEFECTIVE	B	COAMING TOPS & TRACKWAYS DEFECTIVE	T
CLEATS & WEDGES DEFECTIVE	<input checked="" type="checkbox"/> X	STRUCTURAL DISTORTION, HOLE OR CRACK	H

Signature of Master For receipt only.	 Name and signature of Inspector.
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HC FORM

SHIP SURVEY QUESTIONS

(Questions 46, 47 & 59 thru' 67 defects are to be recorded using copies of the HC Form)

ABC No.		NOT CHECKED	NOT RELEVANT	YES	NO
S1	Can ship's staff confirm if the holds have been sea water washed ?				✓
S2	Can ship's staff confirm if the holds have been fresh water rinsed ?			✓	
S3	Was the ship's certification relating to hatch cover weathertightness (Class survey) valid ? [e.g. LR require this annually under Rule: Part 1, Chapter 3, Section 2.2.2(a)]				
46	Are external vents, sounding pipes and their closing appliances in good condition and correctly labelled ?			✓	
47	Are all external watertight closures of deck openings in satisfactory condition and well maintained ? (e.g. Access hatches)			✓	
59	Are these items in satisfactory condition ?	hatch cover panels / pontoons		✓	
60		hinge pins, locators, wheels & axles		✓	
61		hatch cover seal packing or tarpaulins		✓	
62		seal packing channels		✓	
63		all cleats, wedges and securing bars		✓	
64		compression bars		✓	
65		coamings		✓	
66		drains and non-return arrangements		✓	
67		coaming tops and trackways		✓	
68	Are hatch covers free from the use of additional sealing methods? (e.g. sealing tape, expanding foam, cement and non-class approved systems)				✓
69	Are hatch coaming internal surfaces free of recent leakage indications ?			✓	
70	Do hatch cover operating systems appear in satisfactory condition ?			✓	
140	Can ship's staff confirm that records of regular testing of bilge systems are kept; including alarms ?	✓			
141	Can ship's staff confirm that bilge soundings are logged daily ?	✓			

Defects not recorded on the HC Form(s) should be listed on a separate sheet and cross-referenced to the above question numbers, where applicable

The Written Report Should Give Details Of The Following :

- General layout and relevant particulars of the ship
- Standard of maintenance of relevant parts of the ship (including hatch repairs in hand)
- Cargoworthiness in general terms
- Any notable safety aspects
- Other relevant information
- Summary and conclusion

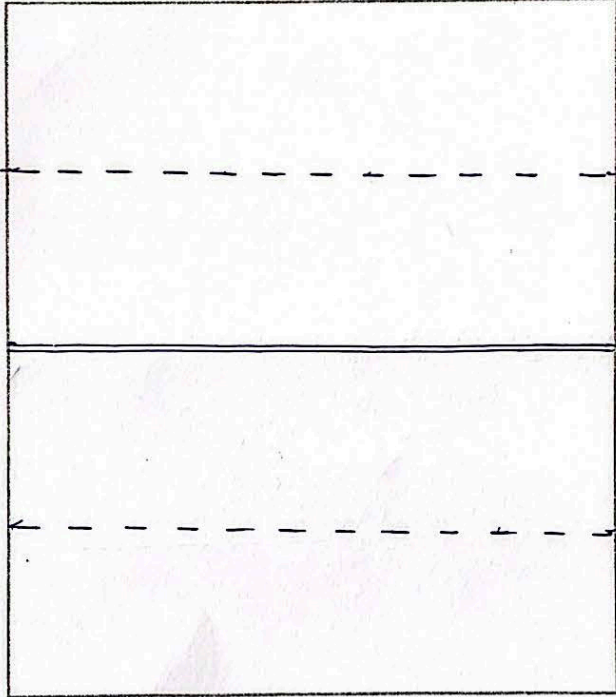
DEFICIENCY RECORD FOR HATCH COVERS, COAMINGS, ACCESSSES & VENTS

(COMPLETE THIS PAGE ONLY IF THERE ARE DEFICIENCIES TO REPORT
THEY SHOULD BE FORWARDED WITH THE DEFICIENCY LIST AND A COPY LEFT WITH THE MASTER)

HATCH NO: <u>2</u> (One page per hatchway - Handwritten only)	PORT/CENTRE/STBD* * Delete as necessary	SHIP XXXXXXXXXX DATE XXXXXX
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IF APPROPRIATE SHOW RELATIVE POSITION OF HATCH PANEL JOINTS, ACCESSSES & VENTS

FWD



P
O
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T
S
T
B
D

AFT

CROSS-REFERENCE TO QUESTION(S) 46, 47, 59, 60, 61, 62, 63, 64, 65, 66 & 67 *

TEST METHOD: ULTRA-SOUND HOSE / CHALK / NONE * Note: If ultra-sound test was used a separate report is required.

WAS INSPECTION INCOMPLETE DUE TO OPERATIONAL REASONS? YES/NO *

LEAKAGE AREA	L	SEAL PACKING DEFECTIVE	S
COMPRESSION BARS DEFECTIVE	B	COAMING TOPS & TRACKWAYS DEFECTIVE	T
CLEATS & WEDGES DEFECTIVE	X	STRUCTURAL DISTORTION, HOLE OR CRACK	H

Signature of Master For receipt only.	 Name and signature of Inspector.
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HC FORM

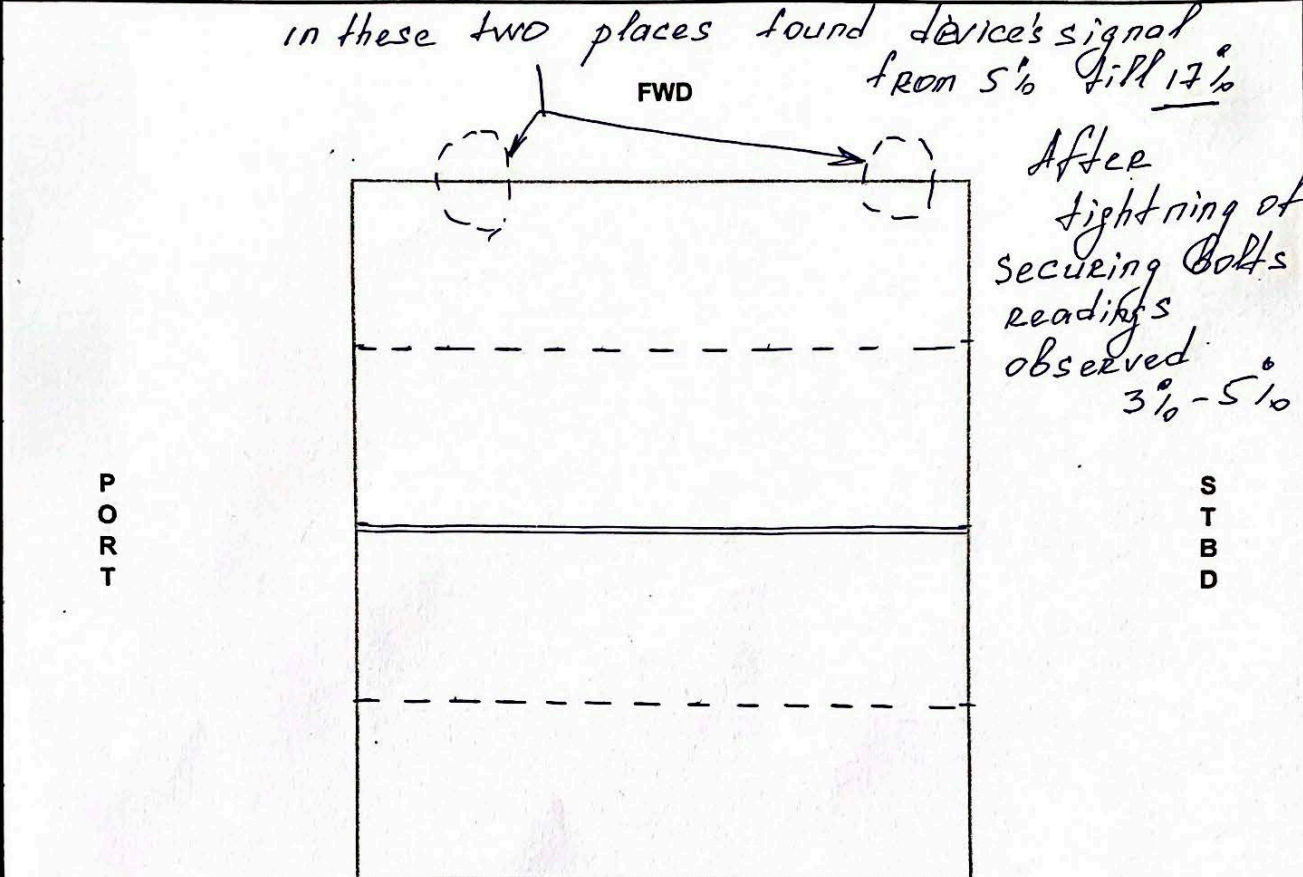
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HATCH NO: <i>3</i>	PORT/CENTRE/STBD* <i>* Delete as necessary</i>	SHIP [REDACTED]
(One page per hatchway - Handwritten only)		DATE [REDACTED]

IF APPROPRIATE SHOW RELATIVE POSITION OF HATCH PANEL JOINTS, ACCESSSES & VENTS



It is advised to Chief Officer to use Ram-Nek waterproof tape

AFT

CROSS-REFERENCE TO QUESTION(S) 46, 47, 59, 60, 61, 62, 63, 64, 65, 66 & 67 *

TEST METHOD ULTRA-SOUND HOSE / CHALK / NONE*

Note: If ultra-sound test was used a separate report is required.

WAS INSPECTION INCOMPLETE DUE TO OPERATIONAL REASONS? **YES/NO***

LEAKAGE AREA	L	SEAL PACKING DEFECTIVE	S
COMPRESSION BARS DEFECTIVE	B	COAMING TOPS & TRACKWAYS DEFECTIVE	T
CLEATS & WEDGES DEFECTIVE	X	STRUCTURAL DISTORTION, HOLE OR CRACK	H

Signature of Master
For receipt only.



[Signature] (Dmytro FILIPCHUK)
Name and signature of Inspector.

HC FORM

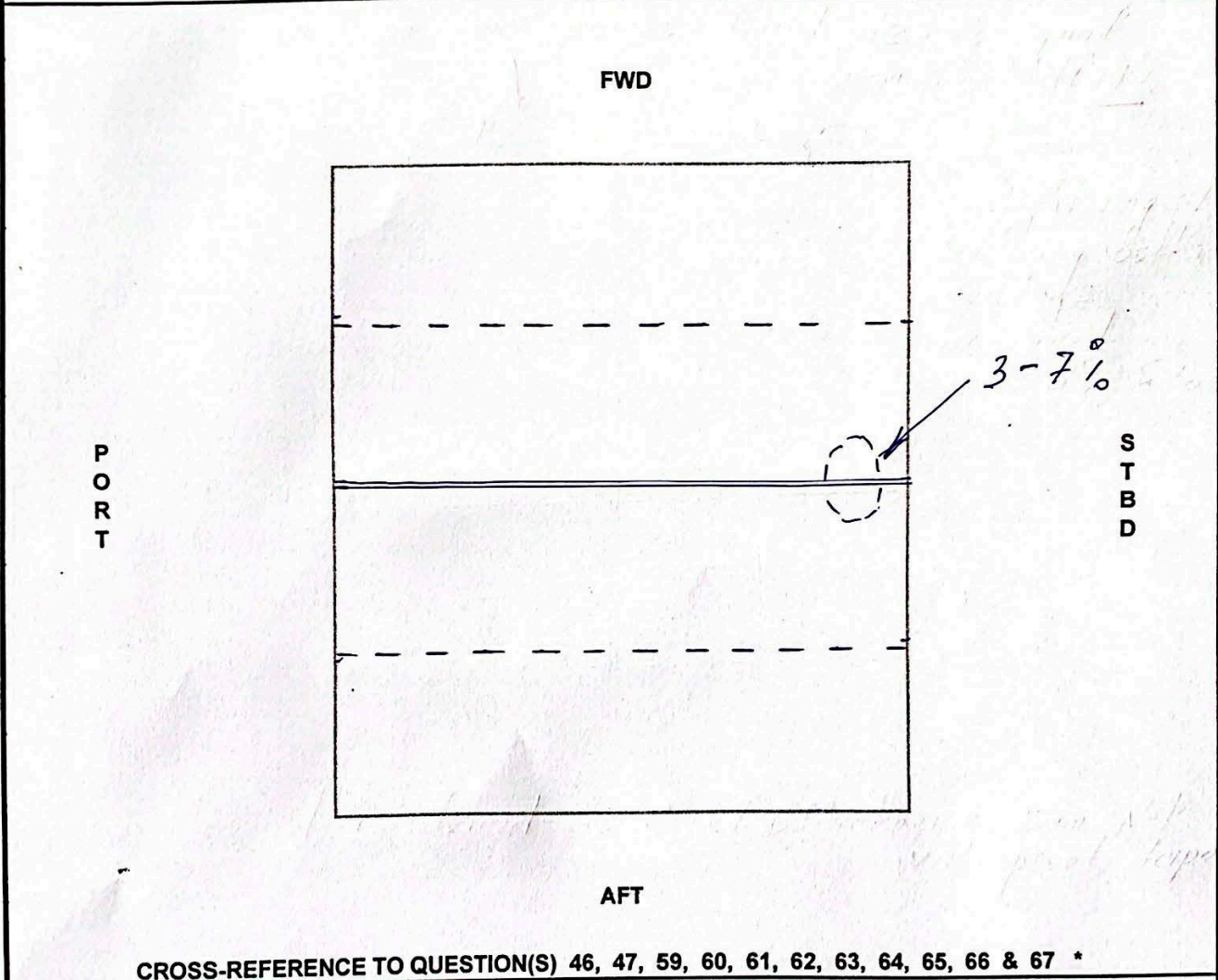
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HATCH NO: <u>4</u> <small>(One page per hatchway - Handwritten only)</small>	PORT/CENTRE/STBD* <small>* Delete as necessary</small>	SHIP <u>[REDACTED]</u>
		DATE <u>[REDACTED]</u>

IF APPROPRIATE SHOW RELATIVE POSITION OF HATCH PANEL JOINTS, ACCESSSES & VENTS

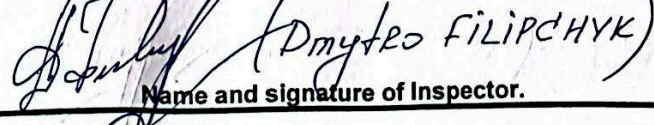


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TEST METHOD: ULTRA-SOUND HOSE / CHALK / NONE* Note: If ultra-sound test was used a seperate report is required.

WAS INSPECTION INCOMPLETE DUE TO OPERATIONAL REASONS? -YES/NO*

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HC FORM