

INFORMATION TO BE NOTIFIED BEFORE ENTRY INTO THE PORT OF KIEL

(Port of destination as referred to in Article 6 of Directive 2000/59/EG)

1. Name, call sign and, where appropriate, IMO identification number of the ship:

2. Flag State: _____
3. Estimated time of arrival (ETA): _____
4. Estimated time of departure (ETD): _____
5. Previous port of call: _____
6. Next port of call: _____
7. Last port and date when ship-generated waste was delivered:

8. Are you delivering all some none (*) of your waste into port reception facilities?
9. Type and amount of waste and residues to be delivered and/or remaining on board and percentage of maximum storage capacity:

*If delivering all waste, complete second column as appropriate.
If delivering some or no waste, complete all columns.*

1	2	3	4	5	6
Type	Waste to be delivered (m ³)	Maximum dedicated storage capacity (m ³)	Amount of waste retained on board (m ³)	Port at which remaining waste will be delivered	Estimated amount of waste to be generated between notification and next port of call (m ³)
1. Waste oils					
Sludge					
Bilge water					
Others (specify)					
2. Garbage					
Food waste					
Plastic					
Other					
3. Cargo-associated waste (¹) (specify)					
4. Cargo residues (¹) (specify)					

(¹) *May be estimates.*

Notes:

1. This information may be used for port State control and other inspection purposes.
2. Member States will determine which bodies will receive copies of this notification.
3. This form is to be completed unless the ship is covered by an exemption in accordance with Article 9 of Directive 200/59/EC.

I confirm that

- the above details are accurate and correct and
- there is sufficient dedicated onboard capacity to store all waste generated between notification and the next port at which waste will be delivered.

Date: _____

Time: _____

Signature: _____

(*) *Tick appropriate box.*

Please send the completed form to **Hafenamt der Landeshauptstadt Kiel - Fax +49 (0) 431 94477**