



Quarantine Pre-arrival Report for Vessels (Pratique) that are 25m or more

Commonwealth of Australia *Quarantine Act 1908* Section 27A

This form must be provided to AQIS no more than 48 hours and no less than 12 hours prior to the vessel's arrival at the first Cocos Islands' port. AQIS must be notified immediately if the current status of the vessel (relating to questions on this form) changes at any time.
Giving false or misleading information is a serious offence.

Ship's particulars for vessel's first port of call in the Cocos Islands

<p>1. Vessel Name: _____</p> <p>2. Voyage Number: _____</p> <p>3. IMO/Lloyd's Number: _____</p> <p>4. Radio Call Sign: _____</p> <p>5. Last Port of Call: _____</p> <p>6. ETA Anchorage First Port of Call: _____:_____ Hrs ____/____/____</p> <p>7. ETA Berth First Port of Call: _____:_____ Hrs ____/____/____</p> <p>8. First Cocos Islands' Port: _____</p> <p>9. Berth: _____</p>	<p>10..ETD First Port of Call: _____:_____ Hrs ____/____/____ (advise AQIS as to any amended change to the original departure time)</p> <p>11. Next Port of Call: _____</p> <p>12. Net Tonnage: _____</p> <p>13. Number of Cargo Holds/Tanks/Decks: _____</p> <p>14. Vessel Type: _____</p> <p>15. Country of Registry: _____</p> <p>16. Deratting/Deratting Exemption Certificate Issued: Date: _____/_____/_____</p> <p>17. Port of Issue: _____</p>
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Quarantine Pre-Arrival Information (in the spaces provided below answer ALL the following questions and)

18. Have there been any deaths amongst the crew or passengers during the current voyage? YES NO
If YES, please state number of deaths () and cause: _____

19. Is there any person on the vessel during the voyage suffering from an illness that may have been caused by an infectious disease? YES NO
If YES, please state number of people with illness () and cause: _____

20. Are there any animals on board the vessel? (including birds & fish) YES NO
If YES, please give a description of the animal/s: _____

21. In the past 2 years has your vessel been in any Russian Far East Port/s between 40° N, 60° N and west of 147°E during any period between July and September? (If NO, go to Question 24). YES NO

22. If YES, since your last visit to the port/s, has your vessel been inspected and cleared as being free of **ASIAN GYPSY MOTH** by agricultural authorities in Australia, Canada, New Zealand or the USA? YES NO
(If YES, please forward relevant certificate to AQIS)

23. If NO, do you have a certificate on board the vessel issued by Russian Agricultural Authorities during your last visit to a Russian Far East Port, certifying that they had inspected the vessel and found it free of **ASIAN GYPSY MOTH** egg masses? (If YES, please forward relevant certificate to AQIS) YES NO

24. Have you carried livestock, grain or meal in the last 10 cargoes? (If NO, go to question 26). YES NO

25. If YES, list below the type of cargoes, the loading port/s, the discharge port/s and cleaning performed since the livestock, grain or meal cargo was discharged. Livestock/Grain/Meal (Delete which ever inapplicable)

26. After the examination of the vessel and its cargo since leaving the last port of call, did you discover any **BEES** on board? YES NO

27. Will there be any crew changes or disembarking passengers while the vessel is in any Cocos Islands' ports or waters? YES NO

28. If YES, specify the port/s and number of crew/passengers that will be signing off/disembarking:

Name of Vessel: _____ IMO/Lloyd's No: _____

Ballast Water Management (whichever is applicable) **YES NO**

<p>29. Do you intend discharging ANY ballast water in Cocos Islands' ports or waters? (If NO, go to Declaration).</p>	Y <input type="checkbox"/> NO <input type="checkbox"/>
<p>30. If YES, indicate below all ports/locations of intended ballast water discharge in Cocos Islands' ports.</p> <p>1st port <input style="width: 150px; height: 20px;" type="text"/> 2nd port <input style="width: 150px; height: 20px;" type="text"/> 3rd port <input style="width: 150px; height: 20px;" type="text"/></p> <p>4th port <input style="width: 150px; height: 20px;" type="text"/> 5th port <input style="width: 150px; height: 20px;" type="text"/> 6th port <input style="width: 150px; height: 20px;" type="text"/></p>	
<p>31. Have you undertaken a full ballast water exchange at sea (independent of an AQIS DSS report) in a manner consistent with the IMO guidelines, before arrival in Cocos Islands' ports or waters? (If YES, go to question 37).</p>	Y <input type="checkbox"/> NO <input type="checkbox"/>
<p>32. Does your vessel have a current Compliance Agreement with AQIS? (If NO, go to question 34).</p>	Y <input type="checkbox"/> NO <input type="checkbox"/>
<p>33. If YES, are you operating in accordance with this Compliance Agreement during the current voyage to the Cocos Islands? (If YES, go to Declaration).</p>	Y <input type="checkbox"/> NO <input type="checkbox"/>
<p>34. Have you entered ballast tank information into the AQIS DSS to have a risk assessment performed on the ballast water currently in those tanks to be discharged in Cocos Islands' ports or waters? (If NO, go to Declaration).</p>	Y <input type="checkbox"/> NO <input type="checkbox"/>
<p>35. If YES, what is the Risk Assessment Number assigned to your vessel by the AQIS DSS?</p> <p>RAN: <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/></p>	
<p>36. If your AQIS DSS result was HIGH have you undertaken a ballast water treatment/exchange at sea before arrival in Cocos Islands' ports or waters?</p>	Y <input type="checkbox"/> NO <input type="checkbox"/>
<p>37. If YES, indicate below what ballast water treatment/exchange method you used?</p> <p>Sequential (empty/refill) <input type="checkbox"/> Flow Through <input type="checkbox"/> Dilution Method <input type="checkbox"/> Other <input type="checkbox"/></p> <p>If Other please specify: _____</p>	
<p>38. If treatment was not conducted fully in any of the tanks/holds intended for discharge in Cocos Islands' ports or waters, please state reason:</p> <p>_____</p>	
<p>Note: Ship and crew safety are of paramount importance when undertaking ballasting operations, therefore, Masters should undertake ballasting operations in accordance with the International Maritime Organisation guidelines.</p>	

Declaration: I declare that the Master of the above-mentioned vessel has provided the information within this AQIS form. Declarations are to be held on board the ship for a minimum of 2 years and must be presented for inspection by a Quarantine Officer at any Cocos Islands' port.

<p>Declaration made by:</p> <p>Printed Name: _____</p> <p>Signature: _____</p> <p>Rank/Position: _____</p> <p>Date: ____/____/____</p>	<p>Shipping Agency Name: _____</p> <p>Shipping Agency Phone No: _____</p> <p>Shipping Agency Fax No: _____</p> <p>Shipping Agency E-mail Address: (if applicable) _____</p>
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