



# ALASKA MARITIME Prevention & Response Network

www.ak-mprn.org

## Network Non-Tank Vessel Membership Enrollment Form

Western Alaska Alternative Planning Criteria for Non-Tank Vessels  
in Western Alaska and/or Prince William Sound COTP Zones

### Operator Particulars/Contact Information

*Note: This enrollment form is only to be used for Non-Tank Vessels as defined by 33 CFR 155 Sub. J*

#### Planholder

Name: \_\_\_\_\_

#### Mailing Address:

E-mail:
Phone:

#### Billing Address (if different):

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#### Vessel Operator

Name & Address:
E-mail:
Phone:

#### Vessel Qualified Individual (QI)

Name & Address:
E-mail:
24 Hr Phone:

#### Vessel Information:

Name:	IMO:
Total Fuel Oil Capacity (bbls):	
E-mail:	
24 Hr/Satellite Phone:	

*Note: Multiple vessels under the same Planholder, Operator, and Qualified Individual (QI) can be added on page 2 of this enrollment form as necessary.*

**Notification Options: Who should be notified if a covered vessel departs from APC operational requirements?**

**Vessel Operator**  
Yes  No

**Vessel QI**  
Yes  No

**Vessel Master**  
Yes  No



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This page to be used for multiple vessels sharing the same Planholder, Vessel Operator and Qualified Individual (QI):

	<i>Vessel Name</i>	<i>IMO Number</i>	<i>Fuel Capacity (bbls)</i>	<i>Vessel Email Address</i>	<i>Sat. Phone</i>
<b>1</b>					
<b>2</b>					
<b>3</b>					
<b>4</b>					
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### **2014 Membership Fees**

See [www.ak-mprn.org/2014fees](http://www.ak-mprn.org/2014fees) for an explanation of 2014 membership fees, including discounts for multiple vessels.

An invoice with wire instructions will be issued within one business day of receipt of completed enrollment form.



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Please review and check each box below. By doing so, the undersigned hereby acknowledges, and affirms, compliance with each statement.

- I/we have read the Alternative Planning Criteria for non-tank vessels sailing in Western Alaska and/or Prince William Sound COTP Zones, effective December 20, 2013.
- I/we agree to be bound by the terms and conditions of the NTV APC, including the operating conditions outlined in the APC.
- I/we affirm that our Qualified Individual is duly authorized to execute and enter into a response action contract for oil spill response resources, as set forth in the APC NTV, on behalf of Planholder in the event requested to do so by Planholder or designated Federal On Scene Coordinator.
- I/we acknowledge operational compliance with the NTV APC rests solely with the operator and vessel master.
- I/we affirm we are duly authorized to confirm our organizations', and their covered vessels', participation in the Alternative Planning Criteria for non-tank vessels sailing in the Western Alaska and/or Prince William Sound COTP Zones.
- I/we acknowledge any departure from the conditions or operational guidelines in the NTV APC requires prior approval from the Captain of the Port Western Alaska.

Certified by: \_\_\_\_\_  
Signature Date

Title: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Company: \_\_\_\_\_

E-mail: \_\_\_\_\_

24 Hr Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Fax or E-mail Signed Form To:**  
The "Network"  
E-mail: [enrollment@ak-mprn.org](mailto:enrollment@ak-mprn.org)  
Fax: (907) 348.2330

**Network Contact Information:**  
Ph: Captain Ed Page (907) 463.5078  
Inquiries: [admin@ak-mprn.org](mailto:admin@ak-mprn.org)  
24 Hr Operations Center (Vessel Info.):  
(907) 463.3064  
[operations@ak-mprn.org](mailto:operations@ak-mprn.org)

**Note:** The NTV APC is intended only to facilitate compliance with federal regulations. If this vessel intends to operate within State of Alaska waters the Planholder is required to demonstrate compliance with the State of Alaska requirements. Contact Alaska Chadux Corporation at 907-348-2365, or [admin@chadux.com](mailto:admin@chadux.com) for information in obtaining separate coverage for state waters of Western Alaska and/or Prince William Sound.