

PASSAGE PLANNING INFORMATION

VESSEL NAME:

PASSAGE FROM:

TO:

DATE:

TIME:

VESSEL DETAILS

LOA:

GT:

DRAFT FWD:

DRAFT AFT:

TYPE OF RUDDER:

BOW THRUST (Y/N):

TYPE OF PROPELLER:

FIXED/VP LH/RH

EQUIPMENT TESTS

MAIN ENGINES: Y/N

STEERING GEAR: Y/N

WINDLASS: Y/N

ANY DEFICIENCIES OF EQUIPMENT:

TIDAL AND WEATHER DETAILS

HW @:

WIND SPEED:

WIND DIRECTION:

SEA STATE:

PRESSURE:

VISIBILITY:

PASSAGE DETAILS

NUMBER OF TUGS:

POSITIONS:

DECLARATION

I hereby confirm that the above information has been passed on and understood

Signed

Signed

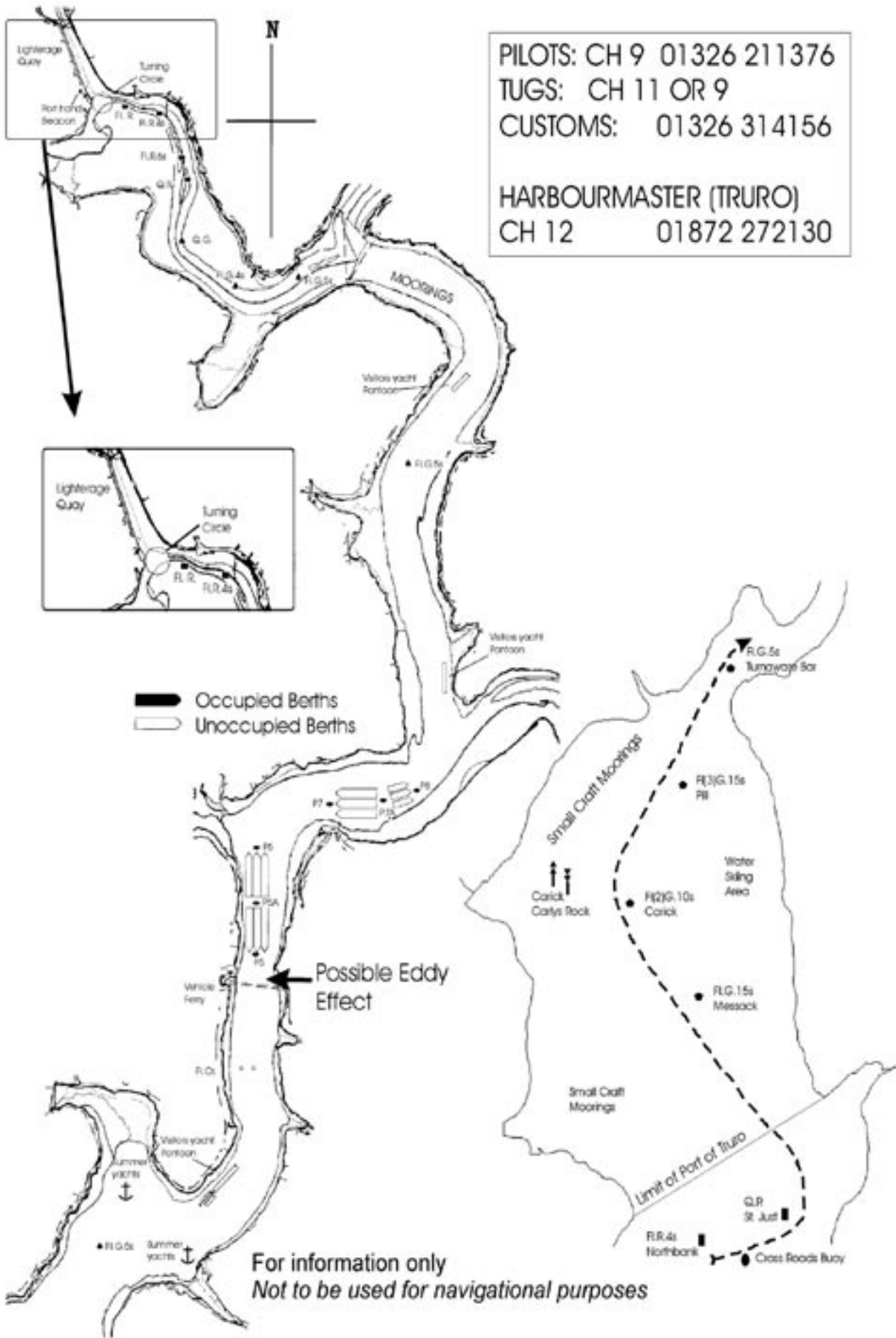
NAME:

NAME:

MASTER

PILOT

PORT OF TRURO PORT PASSAGE PLAN



PILOTS: CH 9 01326 211376
TUGS: CH 11 OR 9
CUSTOMS: 01326 314156

HARBOURMASTER (TRURO)
CH 12 01872 272130

Occupied Berths
 Unoccupied Berths

Possible Eddy Effect

For information only
 Not to be used for navigational purposes