		SUBMISSION DATE
U.S. Department of Homeland Security U.S. Coast Guard	APPLICATION FOR	CODIMICOION DATE
CG-6083 (12-07)	APPROVAL/REVISION OF	VRP CONTROL NUMBER
Vessel Response Plan Review Team	VESSEL POLLUTION	
Commandant, USCG (CG-5431) 2100 Second St. S.W Rm. 2100	RESPONSE PLANS	VESSEL NAME
Washington, DC 20593 Fax: (202) 372-1921	RESI GNOE I EANS	
1. PLAN HOLDER (Company and POC)	1a. ADDRESS	1b. TELEPHONE
		1c. FAX
		1d. E-MAIL
2. PLAN PREPARER	2a. ADDRESS	2b. TELEPHONE
		2c. FAX
		2d. E-MAIL
3. PLAN TYPE (Check all that apply):	4. SUBMISSION TYPE (Check all that apply):	5. ACTION (Check all that apply):
Vessel Response Plan for Oil (Subpart D)	Original or New Plan Submission	Approval
Primary Carrier	Revision (Revision Number:)	(Applies to new, resubmitted, or
Manned	Add/Delete COTP Zone	reactivated plans and revisions that affect the plan holder, added
Unmanned Secondary Carrier	Change in Owner/Operator (33CFR155.1070(c)(1))	vessels, zone changes, and vessel
Tanker Loading Cargo at a Facility	Vessel Name Change	name changes.)
Permitted under the Trans-Alaska Pipeline	Add/Change Oil Group Carried	Duplicate Approval Letter Corrected Approval Letter
Authorization Act (Subpart E) Vessel Carrying Animal Fats and	OSRO Change QI Change	Plan Deactivation
Vegetable Oils as Primary Cargo (Sub F)	Add/Delete Vessel	Plan Reactivation
Vessel Carrying other Non-Petroleum Oils as a Primary Cargo (Subpart G)	Change or Correction	Vessel Deactivation Vessel Reactivation
Nontank Vessel Response Plan (NTVRP)	Annual Review Resubmission	Policy Interpretation
Shipboard Oil Pollution Emergency Plan	5 Year Re-Approval	Plan Review Status
(SOPEP) Shipboard Marine Pollution Emergency	Change in Owner/Operator (33CFR155.1070(b)(2))	No Response Needed Other (Please explain below)
Plan for Noxious Liquid Substances	Nontank VRP Recertification (2 Year)	Other (Flease explain below)
(SMPEP)	Other (Please explain below)	
6. OTHER EXPLAINED		OFFICE USE ONLY
7. ATTACHMENTS INCLUDED <sup>1</sup> :		
	cific Appendix Changed/Corrected Pages	
	Specific Appendix Record of Changes	
Revision(s) Plan Holder Information List of Effected Pages		
8. VESSEL RESPONSE PLAN CERTIFICATION AND AUTHORIZATION: (ensure signature and name is legible)  I, (print name), certify that this submission meets all applicable requirements		
set forth in ( <u>circle applicable subparts</u> ) 33CFR155 / <u>subpart D</u> / <u>subpart E</u> / <u>subpart F</u> / <u>subpart G</u> / and/or 33 U.S.C. 1321(j) (5), and that I have		
identified and ensured the availability of, through contract or other approved means, the necessary private resources to respond to the maximum extent practical, a worst case discharge or a substantial threat of such a discharge from the vessel. (See 18 U.S.C. 1001)		
Authorizing Signature: Date:		
9. SOPEP/SMPEP AUTHORIZATION: (ensure signature and name is legible)		
Authorizing Signature:		Date:
NOTE:  1. This application and attachments may be faxed to (202) 372-1921 or emailed to VRP@USCG.MIL providing that faxes are less than 15 pages and		

<sup>1.</sup> This application and attachments may be faxed to (202) 372-1921 or emailed to VRP@USCG.MIL providing that faxes are less than 15 pages and electronic documents are less than 15 pages and less than 1.5 megabytes.

## 10. COMMENTS

**INTRODUCTION:** This application is offered as an *optional* replacement or supplement to submitting a cover letter. This application is intended to: simplify the plan submission process for industry, simplify the review process for Coast Guard personnel, and promote a standardized procedure in an attempt to reduce the amount of time required for the review process. When submitted properly, this application meets the requirement for a Vessel Response Plan certification statement as required by 33 CFR 155.1065(b). This application may be submitted with the plan(s) or revision(s) to the Vessel Response Plan Program (CG-5431) Room 2100, 2100 Second St. S.W. Washington, D.C 20593-0001. To ensure Coast Guard receipt of your plan or revisions it is recommended that items be sent via trackable means such as a courier service or the Postal Service's Registered Mail system. This application may be submitted by facsimile to 202-372-1921 and electronic mail only if the total submission is no greater than **15 pages per week and less than 1.5 megabytes**. If this application is faxed or emailed to VRP@USCG.MIL and is intended to act as a valid certification statement, please ensure that a legible signature is provided.

## **INSTRUCTIONS**

- BLOCK 1: Enter the Plan Holder information. Include company name and point of contact.
  - **BLOCK 1a.**: Enter the address for the Plan Holder. Include: street, city, state/province, and zip/postal code.
  - BLOCK 1b.: Enter the telephone number for the Plan Holder point of contact. Include country and area code as applicable.
  - **BLOCK 1c.**: Enter the fax number for the Plan Holder point of contact. Include country and area code as applicable.
  - **BLOCK 1d.**: Enter a valid email address for the Plan Holder point of contact if available.
- **BLOCK 2**: Enter the Plan Preparer information. Include company name and point of contact or plan writer. If the subject plan is prepared by the Plan Holder, select the "Same as block 1" option
  - **BLOCK 2a.**: Enter the address for the Plan Preparer. Include: street, city, state/province, and zip/postal code.
  - **BLOCK 2b.**: Enter the telephone number for the Plan Preparer. Include country and area code as applicable.
  - **BLOCK 2c.**: Enter the fax number for the Plan Preparer. Include country and area code as applicable.
  - **BLOCK 2d.**: Enter a valid email address for the Plan Preparer if available.
- **BLOCK 3**: Select the type(s) of plan(s) to be submitted with this application.
- **BLOCK 4**: Select the type(s) of submission(s) enclosed with this application.
- **BLOCK 5**: Select the action or response requested. Note: Approval letters will only be issued for plans that are new, resubmitted, or reactivated, and for revisions that request a change in plan holder, added vessels, vessel name changes, and COTP zone changes.
- **BLOCK 6**: Explain in detail any submission that is not covered above.
- **BLOCK 7**: Select the type(s) of attachments included with this application.
- **BLOCK 8**: For Vessel Response Plans: The vessel owner or operator (as defined in 33 CFR 155.1020) should read and sign the certification to indicate the submitted plan meets the requirements of 33 CFR 155 subpart D, E, F, or G (as applicable) for the vessel(s) listed. Certification indicates the vessel owner or operator accepts responsibility for the compliance of the vessel(s) in the event of an incident or marine casualty. Certification statements must be submitted in accordance with 33 CFR 155.1065(b) and 33 CFR 155.1070(d).
- **BLOCK 9**: For Shipboard Oil Pollution Emergency Plans/Shipboard Marine Pollution Emergency Plans: This block should be completed by a person authorized to write and revise the submitted plan.
- **BLOCK 10**: Space for additional comments and suggestions.