

NOAA Form 57-11-02 (5-12)		U.S. DEPARTMENT OF COMMERCE NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION		OMAO Assigned Clearance #	
CHARTER VESSEL CLEARANCE and REPORT				Contract / Purchase Order #	
FROM (Line Office)		INSTRUCTIONS: Submit the initial Request at least 30 days in advance of the project start date. Submit the completed Report within 30 days after the project end date. Electronically submit the form to: CharterReport.omaoc@noaa.gov , or mail to OMAO, MAOC, 8403 Colesville Road, Suite 500, Silver Spring, MD 20910-6333, or fax to 301-713-1541.			
PRINCIPAL INVESTIGATOR		E-MAIL ADDRESS		TELEPHONE #	
CONTRACTING OFFICER NAME		E-MAIL ADDRESS		TELEPHONE #	
CONTRACTING OFFICER'S REPRESENTATIVE (COR)		E-MAIL ADDRESS		TELEPHONE #	
PROJECT TITLE		PROJECT START DATE	PROJECT END DATE	OPERATING DAYS PLANNED	
CHARTER PURPOSE (provide a brief description of the project and the necessity for charter vessel time)					
PROJECT AREA (indicate staging location, area of operation, and maximum distance from shore)					
VESSEL REQUIREMENTS (lab space, range, endurance, and equipment needs)					
VESSEL INSPECTION LOCATION		VESSEL INSPECTION DATE	NUMBER OF NOAA PERSONNEL TO BE ABOARD (number of berths required)		
Indicate "Projected Cost" upon submission of request and "Final Cost" upon submission of report.			PROJECTED COST	FINAL COST	
COST per DAY (unit cost charged per day)			\$	\$	
ADDITIONAL COSTS (e.g. fuel, oil, provisions, modifications)			\$	\$	
TOTAL COST (for the entire charter)			\$	\$	
ACCOUNTING CODES:	ORGANIZATION CODE		PROJECT/TASK CODE	OBJECT CLASS	
VESSEL OWNER NAME	NAME OF VESSEL	TYPE of VESSEL	VESSEL OFFICIAL NUMBER	VESSEL HOME PORT	
VESSEL TELEPHONE #	VESSEL MAILING ADDRESS		CITY	STATE	ZIP
VESSEL CHARACTERISTICS:	LENGTH	WIDTH	DRAFT	TONNAGE	
	HORSEPOWER	SPEED	RANGE	ENDURANCE	
OPERATIONAL PERFORMANCE	Were mission objectives completed? (quantity and quality of data to be collected)			YES <input type="checkbox"/>	NO <input type="checkbox"/>
SAFETY PERFORMANCE	Were there any incidents, near misses, or did anyone feel at risk during the vessel operations?			YES <input type="checkbox"/>	NO <input type="checkbox"/>
RECOMMENDATION	Would you recommend that NOAA use this vendor to provide future charter vessel services?			YES <input type="checkbox"/>	NO <input type="checkbox"/>
OVERALL PERFORMANCE	On a scale of 1 (very unsatisfactory) to 5 (highly satisfactory), rate the vessel operator's overall performance.				
REMARKS (Reporting official)					
REPORTING OFFICIAL NAME and TITLE		REPORTING OFFICIAL SIGNATURE		DATE	
REMARKS (Clearance official)					
CLEARANCE OFFICIAL NAME and TITLE		CLEARANCE OFFICIAL SIGNATURE		DATE	