

**PORT OF CHARLESTON**

**REQUIRED NOTICE FOR PILOT SERVICES**

**FAX to: CHARLESTON PILOTS @ 843-577-0632**

**VESSEL INFORMATION**

VESSEL NAME \_\_\_\_\_ FLAG \_\_\_\_\_

IMO/LLOYDS VIN \_\_\_\_\_ CALL SIGN \_\_\_\_\_ CARGO \_\_\_\_\_

VESSEL TYPE \_\_\_\_\_ GROSS TONS \_\_\_\_\_ LENGTH \_\_\_\_\_

EST. DATE/TIME ARRIVAL at PILOT STATION \_\_\_\_\_

EST. DATE/TIME DEPARTURE \_\_\_\_\_

LAST PORT OF CALL \_\_\_\_\_ NEXT PORT OF CALL \_\_\_\_\_

FACILITY/TERMINAL \_\_\_\_\_ BERTH # \_\_\_\_\_ FOOTMARK \_\_\_\_\_

TUG COMPANY \_\_\_\_\_ SIDE TO \_\_\_\_\_ LINE/HANDLERS \_\_\_\_\_

DEEP DRAFT IN \_\_\_\_\_ DEEP DRAFT OUT \_\_\_\_\_

LABOR START \_\_\_\_\_ CARGO OPERATIONS (circle one): LOADING DISCHARGING BOTH

**AGENCY INFORMATION**

AGENCY NAME \_\_\_\_\_

AGENT/CONTACT NAME \_\_\_\_\_

DAY PHONE \_\_\_\_\_ AFTER HOURS PHONE \_\_\_\_\_

**SEND PILOTAGE INVOICE TO (NAME AND ADDRESS):** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**AGENT INSTRUCTIONS - SUPPLEMENTAL INFORMATION:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

ORIGINAL ETA \_\_\_\_\_ ORIGINAL ETD \_\_\_\_\_ UPDATE \_\_\_\_\_