



This is the approved form to report a marine incident in Queensland. A ship's master must report a marine incident to a shipping inspector within 48 hours of the incident taking place, except in cases where the ship is lost or presumed lost in which case the incident must be reported by the ship's owner. If the initial report is not in the approved form a further report must be submitted using this form at the earliest opportunity. You should fill in all fields that are applicable. This form, and all supporting documents, should be returned to a Maritime Safety Queensland office, the Queensland Police Service or a Queensland Boating and Fisheries Patrol Office. Penalties apply for failing to report a marine incident.

For the definition of a marine incident as per s.123 TO(MS)A please see [Marine Incidents](#).

Incident description

Position of incident

Date / / Time AM PM Body of water/Landmark

Location

Inland waters (non-tidal) Smooth waters Partially smooth waters Offshore Latitude Longitude

Type of incident

<input type="checkbox"/> Capsizing	<input type="checkbox"/> Collision: <input type="checkbox"/> between ships	<input type="checkbox"/> Grounding: <input type="checkbox"/> unintentional	<input type="checkbox"/> Other incident: <input type="checkbox"/> person hit by propeller or ship
<input type="checkbox"/> Swamping	<input type="checkbox"/> with a fixed object	<input type="checkbox"/> intentional	<input type="checkbox"/> water skiing accident
<input type="checkbox"/> Flooding	<input type="checkbox"/> with a floating object	<input type="checkbox"/> Onboard incident: <input type="checkbox"/> fall within ship	<input type="checkbox"/> parasailing incident
<input type="checkbox"/> Person overboard	<input type="checkbox"/> with an animal	<input type="checkbox"/> crushing or pinching	<input type="checkbox"/> diving incident
<input type="checkbox"/> Loss of stability	<input type="checkbox"/> with an overhead obstruction	<input type="checkbox"/> other onboard incident	<input type="checkbox"/> close call/near miss
<input type="checkbox"/> Fire	<input type="checkbox"/> with a submerged object		<input type="checkbox"/> other incident caused by the operation of the ship
<input type="checkbox"/> Explosion	<input type="checkbox"/> with a wharf		
<input type="checkbox"/> Structural/equipment failure			
<input type="checkbox"/> Loss of ship ¹			

Incident Severity Rating

Fatality Number of persons Serious injury² Number of persons Ship lost³ Damage to property only⁴
 Ship damaged No damage

Environmental conditions

Weather

Clear Hazy Cloudy Rain Flood

Visibility

Good Fair Poor

Water conditions

Calm Choppy Rough Very rough Strong current or tidal flow Swell height (metres)

Wind speed

None Light (1-6kts) Moderate (7-15kts) Strong (16-33kts) Gale (>33kts) Wind coming from

Ships involved

Number of ships involved **Note:** If more than two ships were involved attach details on a separate page.

Own ship

Name of ship
Official registration number Registering authority
Length (metres) Beam (metres) Year built
Number of passengers on board Number of crew on board

Other ship

Name of ship
Official registration number Registering authority
Length (metres) Beam (metres) Year built
Number of passengers on board Number of crew on board

¹'Loss of ship' should only be selected where the ship has disappeared and the location and circumstances of the loss are unknown. If the ship is an economic write-off this should be check marked as 'Ship lost' below and on the next page.

²Requiring admission to hospital ³Economic write-off or not recovered ⁴No damage to any ships

Office use only

File number: _____ MSID number: _____ Received by (full name): _____ Received on: ___/___/___

Ships involved - continued

Registration type

Recreational Ship Other Queensland Regulated Ship

Ship description

Motorboat PWC Passive craft (e.g. kayak, canoe or row boat)
 Sailing boat House boat
 Other (describe)

Engine

Outboard Inboard (petrol) none
 Inboard/outboard Inboard (diesel)
 Other (describe)

Number of engines

Total engine power

 HP kW

Hull material

Steel Timber Ferro-cement
 Marine alloy Fibreglass/GRP
 Other (describe)

Damage to ship

Ship lost⁵ Moderate damage (damaged but ship remains seaworthy)
 Major damage (ship unseaworthy) Minor damage No damage

Registration type

Queensland Regulated Ship Commercial fishing
 Commercial passenger Commercial hire and drive
 Commercial non-passenger

Ship description

Motorboat PWC Passive craft (e.g. kayak, canoe or row boat)
 Sailing boat House boat
 Other (describe)

Engine

Outboard Inboard (petrol) none
 Inboard/outboard Inboard (diesel)
 Other (describe)

Number of engines

Total engine power

 HP kW

Hull material

Steel Timber Ferro-cement
 Marine alloy Fibreglass/GRP
 Other (describe)

Damage to ship

Ship lost⁵ Moderate damage (damaged but ship remains seaworthy)
 Major damage (ship unseaworthy) Minor damage No damage

Persons involved

Own ship

Ship owner's details

Owner's name

Telephone

Mobile phone number

Address

Postcode

Email address

Master's details

Master's name

Date of birth

 / /

Gender Male Female Other Prefer not to answer

Licence type

RMDL PWCL Certificate of Competency

Licence number

Issuing authority

Issue date

 / /

Expiry date (if applicable)

 / /

Telephone

Mobile phone number

Other ship

Ship owner's details

Owner's name

Dedicated person ashore/operations manager (commercial only)

Telephone

Mobile phone number

Address

Postcode

Email address

Master's details

Master's name

Date of birth

 / /

Gender Male Female Other Prefer not to answer

Licence type

RMDL PWCL Certificate of Competency

Licence number

Issuing authority

Issue date

 / /

Expiry date (if applicable)

 / /

Telephone

Mobile phone number

⁵ Economic write-off or not recovered

Persons involved - continued

Address

Email address

Other persons involved

Role
 Person at helm (details as above) Passenger/Crew member

Name Date of birth

Gender Male Female Other Prefer not to answer

Licence type
 RMDL PWCL Certificate of Competency

Licence number Issuing authority

Issue date Expiry date (if applicable)

Telephone Mobile phone number

Address

Email address

Address

Email address

Other persons involved

Role
 Person at helm (details as above) Passenger/Crew member

Name Date of birth

Gender Male Female Other Prefer not to answer

Licence type
 RMDL PWCL Certificate of Competency

Licence number Issuing authority

Issue date Expiry date (if applicable)

Telephone Mobile phone number

Address

Email address

Witnesses

Note: include name and contact details of any witnesses to the incident in the **Owner's/Master's report** on page 4.

Deceased or injured person Yes No

Note: if more than two people deceased or injured include name and contact details in the **Owner's/Master's report** on page 4.

Name Date of birth

Gender Male Female Other Prefer not to answer

Address

Telephone Which ship was this person associated with?

Deceased or injured person

Name Date of birth

Gender Male Female Other Prefer not to answer

Address

Telephone Which ship was this person associated with?

Injury status

Fatality Missing person Serious injury⁶ Minor injury

Nature of injury Name of hospital

Activity of injured or deceased person

Person in charge (Master) Surfboard/surf-ski rider
 Other person at helm Swimmer
 Crew Para-flier
 Passenger on vessel Diver
 Being towed/water-skier Other

Injury status

Fatality Missing person Serious injury⁶ Minor injury

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Person in charge (Master) Surfboard/surf-ski rider
 Other person at helm Swimmer
 Crew Para-flier
 Passenger on vessel Diver
 Being towed/water-skier Other

⁶A serious injury is defined as one where the injured person was admitted to hospital.

Privacy statement: The Department of Transport and Main Roads (TMR) collects the information on this form to manage marine incident reporting under the authority of the Transport Operations (Marine Safety) Act. This information may be accessible by relevant law enforcement agencies where required. TMR will not disclose your personal information to any other third party without your consent unless authorised or required by law. For more information on how MSQ manages your personal information, visit www.tmr.qld.gov.au/help/privacy

Report details

Owner's/Master's report

Provide in the space below a full description of the marine incident and events leading up to the marine incident.

Drawings, charts or images

Provide in the space below any drawings, charts or images of the marine incident including any hand drawn maps or marked up charts.

Assistance rendered/received at incident

Name, status and phone number of person who assisted in completion of form (if applicable) _____

Signature (Owner/Master) _____ **Date** ____/____/____

Owner/Master name (please print) _____