



Worldwide Facilities, Inc.

Marine Dept.

APPLICATION: OPA '90 - OIL POLLUTION LIABILITY

APPLICANT/OWNER: _____

ADDRESS: _____

OPERATOR: _____

ADDRESS: _____

VESSEL NAME	CONST./TYPE	YR BLT	GRT	FUEL CAP.
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1.

2.

3.

4.

5.

NOTE: If vessels are tank vessels they are not eligible for this program. A tank vessel is a vessel that is constructed or adapted to carry oil or hazardous material in bulk as cargo or cargo residue.

DOES ASSURED TOW TANK VESSELS? YES _____ NO _____

If yes, what percentage of the overall operations include towing of tank vessels?
_____%

IF THE VESSELS ARE NOT TANK VESSELS, WILL THEY EVER CARRY ANY OIL, FUEL, OR HAZARDOUS MATERIALS ON BOARD IN BARRELS OR CONTAINERS FOR OTHERS, NOT TO BE USED FOR PROPELLING ITSELF?

YES _____ NO _____

If yes, please describe: _____

DO ANY OF THE VESSELS REQUIRE A COAST GUARD CERTIFICATE OF FINANCIAL RESPONSIBILITY? IF SO, PLEASE IDENTIFY: _____

LIMIT REQUESTED: \$ _____

EFFECTIVE DATE: _____

DESCRIPTION OF OPERATION: _____

NAVIGATION LIMITS OR TRADING WARRANTY: _____

IF CURRENT SURVEY(S) IS/ARE AVAILABLE, PLEASE ATTACH.

CURRENT POLLUTION CARRIER: _____

POLLUTION LOSS HISTORY: (last 5 years for all vessels owned/operated, chartered) _____

BROKER: _____

ADDRESS: _____

TELEPHONE: _____ FAX: _____

APPLICANT'S SIGNATURE: _____ DATE: _____

PRODUCER'S SIGNATURE: _____ DATE: _____