**BWTS CHECK LIST**

(should be completed for exact quotation)

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| --- | --- | --- | --- | --- |
| Date of next D/D: |  |  | Vessel: |  |
| Place of next D/D: |  |  | IMO №: |  |

|  |  |  |
| --- | --- | --- |
| 1 | Vessel type *(container, bulk carrier, tanker etc.)* |  |
| 2 | Vessel register / flag |  |
| 3 | Ballast pumps capacity *(total)* |  |
| 4 | Ballast pump №1 type *(centrifugal etc.)* |  |
| 5 | Ballast pump №1 discharge pressure/height *(MPa./m)* |  |
| 6 | Ballast pump №2 type *(centrifugal etc.)* |  |
| 7 | Ballast pump №2 discharge pressure/height *(MPa./m)* |  |
| 8 | Ballast pump №3 type *(centrifugal, piston etc.)* |  |
| 9 | Ballast pump №3 discharge pressure/height *(MPa./m)* |  |
| 10 | Ballast pumps location (*engine room, pump room, in tank etc.)* |  |
| 11 | Probably location of BWTS *(engine room or weather deck)* |  |
| 12 | How many BWTS do you need *(1, 2, 3)* |  |
| 13 | Quotation for 3D scanning and design *(yes/no)* |  |
| 14 | Quotation for drawing approval with class *(yes/no)* |  |
| 15 | Quotation for installation materials *(yes/no)* |  |
| 16 | Quotation for BWTS installation (*yes/no)* |  |
| 17 | Quotation for delivery BWTS to your destination (yes/no) |  |
| 18 | If previous “yes” indicate destination *(city & country)* |  |
| 19 | Do you planned installation at dry dock or during voyage? |  |
| ***Moreover, please provide following drawing:***  ***General Arrangement, Ballast system, Ballast pump specification.*** | | |

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| **Remarks (*if necessary)*:** |

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| Name / Position: |  | Date: |  |  |