

VIRGINIA DEPARTMENT OF ENVIRONMENTAL QUALITY

APPLICATION FOR APPROVAL OF A TANK VESSEL OIL DISCHARGE CONTINGENCY PLAN (ODCP)

Virginia Department of Environmental Quality
Office of Spill Response and Remediation
P. O. Box 10009
Richmond, Virginia 23240 USA

Location address:
629 East Main Street
Richmond, Virginia 23219 USA

Please type or print all items (except signature in certification section). This form must be completed for each tank vessel transferring or transporting oil upon Virginia waters subject to regulation 9 VAC 25-101-10 et seq. If multiple vessels are to be included in this application, list the tank vessel name, flag and cargo capacity of each additional tank vessel and attach as a continuation page. If U. S. Coast Guard Vessel Response Plan (VRP) approval is submitted with this application, the tank vessel operator shall be the same entity as indicated on the VRP approval letter. Additional instructions for this application are found on the attached sheet.

Please check one: Is this the first application for plan approval? _____ or a renewal? _____

Please check one: Does this application include 1) U. S. Coast Guard VRP approval, including authorization for operating the vessel in the COTP zone of Hampton Roads, VA? _____ or
2) submittal of an actual ODCP as per 9 VAC 25-101-40? _____ (If checking 2), please refer to instruction sheet for fee schedule.)

| Tank Vessel Name | Flag | Oil cargo capacity (US gallons) |
|------------------|------|---------------------------------|
|------------------|------|---------------------------------|

Name and mailing address of tank vessel
Operator

Name of agent or person authorized for
spill response (Qualified Individual)

Telephone number of tank vessel operator

Telephone number of QI/agent

Fax number of tank vessel operator

Fax number of QI/agent

Certification

I certify that I have personally examined and am familiar with the information submitted in this and all attached documents, and I believe that the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (To be signed by the tank vessel operator.)

Printed name of authorized person
signing this application

Signature of authorized person

Date
