AUTHORIZATION TO PROCEED

California Shoreline Protection Coverage

TO: NATIONAL RESPONSE CORPORATION

FAX: +1 (631) 481-8162 PHONE: +1 (631) 224-9141
EMAIL: IOCDO@NRCC.COM

ATTN: IOC DUTY OFFICER

SUBJ: REQUEST FOR STATE OF CALIFORNIA SHORELINE PROTECTION and/or
REQUEST FOR 6-HOUR ON-WATER-RECOVERY
Provision for Additional Spill Response resources

In accordance with regulatory requirements contained in the Shoreline Protection Tables found in CCR, Title 14, Chapter 3, Section 818.02(f) and Subchapter 4, Section 827.02(i), and 6 Hour On-Water Recovery per requirements found in sections 818.02 and 827.02 of Title 14 of the California Code of Regulations. Request to provide additional spill response resources for the following vessel:

24 Hour Notification for Additional Spill Response Resources

Date & Time of Request: _____

Vessel Name: _____

RWCD (capacity of largest fuel tank): _____

Owner/Operator: _____

Shoreline Protection Table Location (Port): _____

ETA & ETD 3 mile State Waters Boundary: _____

ETA: _____

I hereby acknowledge receipt of National Response Corporation's rate schedule published and effective as of February 18th annually, which is also posted on NRC's webpage http://www.nrcc.com, and hereby authorize National Response Corporation to provide goods and services for this job and also accept the terms of the rate schedule set forth and agree to pay according to said schedule any and all monies due and owing within ten (10) days from invoice date. I understand that a finance charge of 1 1/2% per month, which is an annual percentage rate of 18%, will be charged on all past due accounts.

Client/Master/QI Authorization:

Name: _____ Company: _____
(Please Print)

_____ 24 Hour Phone/ Fax: _____
(Please Sign)

E-Mail Address: _____

Agent: (if known)

Name: _____ Phone/Fax/E-mail: _____