

R/V ELAKHA CRUISE PLAN

Departure Date: _____ **ETD** _____ **Arrival Date:** _____ **ETA** _____

Chief Scientist: Name: _____ Phone: _____

E-Mail: _____ *Authorization to Charge:* _____

OSU Users: Index to be Charged: _____

*Check **all** that apply:* CEOAS OOI HMSC

CIMRS PISCO Integrative Biology ODFW Peterson Group NOAA Other

Other Users: Billing Address: _____

City/State/Zip: _____ P.O.#: _____

- Special Requirements:**
- · Diving (OSU Diving Officer Authorization Required)*
 - · Radioactive Materials (OSU Radiation Safety Office Permit Required)*
 - · Other (Describe): _____

*To request the **Shore Crane**, please contact ShipOps directly. Crane hours are from: 0800-1600. See page 2.*

Area of Operation/Itinerary:

(Include estimated times at major locations and any ports other than Newport)

Type of Work:

(Include vessel equipment requirements.)

Science Party: **Attach List** of Science Party Personnel by Name & Affiliation. Please indicate those participants who have completed Sea Safety & Survival Training. (Required Release & Consent Forms will be handed to the Ship's Captain when boarding.)

- NOTES:**
1. Chief Scientist is responsible for any required sampling permits or approvals (*).
 2. Cancel Policy: At least two working days in advance.
 3. This Cruise Plan will also be used for billing purposes. *Please have PI pre-authorize charge to Index, by e-signing cruise plan, or sending an email to Ship Ops Coordinator, prior to departure date.*

FOR SHIP OPERATIONS USE ONLY

Departure Date: _____ Time _____ Arrival Date: _____ Time _____

	Tot. Hrs.
X _____	Rate
\$ _____	Sub Tot.
+ _____	Other Chgs
\$ _____	Total

Remarks:

Captain: _____ Deckhand: _____ Additional Crew: _____

J/V Inv
Authorization Attached

Boat Operator _____ Marine Superintendent _____

List of Science Party Personnel & Students:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____
13. _____

Contact Ship Ops early, to schedule Shore Crane.

Shore Crane operations are from 0800-1630; and are dependent on availability of Crane Operator.

Please enter date and time of your Shore Crane request(s).

MOB-ShoreCraneOps:

DEMOB-ShoreCraneOps:

Additional Cruise Information: (i.e. winch type, etc.)