



Cleaning Plant Scheduling Form

Customer Name		
Vessel Name		
PO Number		
Contact Name		
Telephone		
Email Address		
Requested Date of Service		
Reason for Service	☐ Change of Cargo ☐ Shipyard	☐ Repair ☐ Lay berth
Level of Cleaning	☐ Gas Free ☐ Safe for Entry	☐ Chemist Certificate ☐ Other
Last Three Cargo	☐ Clean ☐ Black (API)	
	1	
	2	
	3	
Specific Areas Requiring Service		
Compartments for Service		
Spaces or Other Areas		
Other Services Needed		
Vendors for Attendance All Vendors must fill out Vendor Authorization Form – Clean Water of New York, Inc	1	
	2	
	3	

SEND THIS SCHEDULING FORM, CREW LIST, VENDOR LIST TO: Plant@cwofny.com

Please note: Clean Water of New York, Inc. will not contact, schedule or pay for Marine Chemist services. You and your representative MUST make all arrangements including payment.

By sending the scheduling form the company and vessel expressly accept and agree to all the "cleaning plant terms and conditions," available at www.cwofny.com/cleaning-plant-terms-and-conditions/ and upon request, as it they were all signed by the company and vessel and set forth at length herein