



The New Jersey Maritime Pilot & Docking Pilot Commission

One Penn Plaza East * 9th Floor * Newark, NJ 07105

DOCKING PILOT ANNUAL REPORT FORM

_____ Date

Dear Sir:

I _____ have docked/undocked/moved _____ vessels in the past year in the following areas:

Port of New York/New Jersey	_____
Connecticut	_____
Long Island Sound	_____
Other _____	_____
Other _____	_____

I have been absent from during the past year for the following reasons:

<u>Reason Absent</u>	<u># of Days</u>
_____	_____
_____	_____
_____	_____

Listed below are any extra activities related to the maritime industry that I have been involved in during the past year.

Listed below are all the current medications and supplements including dosage that I have filled or refilled and/or taken within 30 days and all prescription and non-prescription medications including supplements and vitamins that were used for a period of 30 or more days within the last 90 days.

My annual physical was submitted to the Coast Guard on _____.

Respectfully submitted,

Cell No. _____

Email: _____