

DEPARTMENT OF HOMELAND SECURITY
U.S. Coast Guard

OMB No: 1625-0001
Exp. Date: 07/31/2022

REPORT of MARINE CASUALTY, COMMERCIAL DIVING CASUALTY, or OCS-RELATED CASUALTY

Section I - Reporting Vessel/Facility Information

1. Vessel or Facility Name GAS ARES		2. Vessel Official Number or IMO Number 9892391		3. Vessel Flag PANAMA	
4. Vessel Length 229.98 <input type="checkbox"/> Feet <input checked="" type="checkbox"/> Meters		5. Vessel Gross Tons 48858		6. Vessel Propulsion Type VESSEL USING ENGINE	
7. Vessel or Facility Type LPG CARRIER		8. Vessel or Facility Service or Occupation CARGO SHIP			
9. FOR TOWING ONLY	9a. Arrangement:	9b. Number of Vessels Towed:		9c. Maximum Size of Tow/Tow-Boat(s):	
	<input type="checkbox"/> Pushing Ahead	Empty _____	Length _____ feet		9d. Did one or more of the barges in the tow cause or sustain damage in the marine casualty? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If Yes complete and attach one or more CG-2692A forms to this report)</i>
	<input type="checkbox"/> Towing Astern	Loaded _____	Width _____ feet		
<input type="checkbox"/> Towing Alongside	Total _____				

Section II - Reason for Submitting this Report (Check all that apply)

10. The above vessel was involved in a Marine Casualty consisting in (46 CFR 4.05-1 and 4.05-10):
- 1. Unintended grounding or an unintended strike of (allision with) a bridge
 - 2. Intended grounding or intended strike of a bridge that created a hazard to navigation, the environment or the safety of the vessel, or that meets any of the criteria in 3 through 8 below
 - 3. Loss of main propulsion, primary steering, or any associated component or control system that reduces the maneuverability of the vessel
 - 4. Occurrence materially and adversely affected the vessel's seaworthiness or fitness for service or route
 - 5. Loss of life
 - 6. Injury that requires professional medical treatment (treatment beyond first aid) and, if the person is engaged or employed on board a vessel in commercial service, that renders the individual unfit to perform his or her routine duties
 - 7. Occurrence causing property damage in excess of \$75,000
 - 8. Occurrence involving significant harm to the environment
11. The above facility or vessel was involved in a Commercial Diving Casualty involving (46 CFR 197.484):
- 1. Loss of life
 - 2. Diving-related injury to any person causing incapacitation for more than 72 hours
 - 3. Diving-related injury to any person requiring hospitalization for more than 24 hours
12. The above facility or vessel was involved in an OCS Facility Casualty Resulting in (33 CFR 146.30 and 146.35):
- 1. Death
 - 2. Injury to 5 or more persons in a single incident
 - 3. Injury causing any person to be incapacitated for more than 72 hours
 - 4. OCS Facility only - Damage affecting the usefulness of primary lifesaving or firefighting equipment
 - 5. OCS Facility only - Damage to the facility exceeding \$25,000 resulting from a collision by a vessel with the facility
 - 6. OCS Facility only - Damage to a floating OCS facility exceeding \$25,000

Section III - Associated Parties Information (Fill all fields that apply)

13. Name of Owner KSS LINE LTD. Address 8TH FLOOR DAEIL BUILDING, 12, INSADONG-GIL, JONGNO-GU, SEOUL, KOREA		Telephone 82 2 37022710	14. Name of Operator or Manager KSS LINE LTD. Address 8TH FLOOR DAEIL BUILDING, 12, INSADONG-GIL, JONGNO-GU, SEOUL, KOREA		Telephone 82 2 37022710
		Email address BG@KSSLINE.COM			Email address BG@KSSLINE.COM
15. Name of Master or Person-in-Charge (Last, First, Middle) OH, CHANGUK Address [REDACTED]		Telephone +1 [REDACTED]	16. Name of Agent (Last, First, Middle) [REDACTED] Address Cory Brothers (USA) Inc Brookhollow Central 1 2800 North Loop West		Telephone [REDACTED]
		Email address GTAR@KSSFLEET.COM			Email address [REDACTED]
17. Name of Dive Supervisor (Last, First, Middle) N/A Address N/A		Telephone N/A	18. Name of Pilot (Last, First, Middle) G.M. GOTTSCHALK Address UNK		Telephone UNK
		Email address N/A			Email address UNK

Section IV - Casualty Information

19. Date/Time (local) of Occurrence NOV . 25 / 2227LT		20. Location-Name of Body of Water or Waterway: Latitude: 29-59.570N Longitude: 093-56.286W OR River Mile Marker:	
21. Property Damage Estimated Damage Cost(s) to: Vessel: \$ UNK Cargo: \$ UNK Facility: \$ UNK Other: \$ UNK		Describe the Extent of Property Damage UNK	
22. Status of Involved Persons (If there are 1 or more injured, dead or missing persons complete and attach one or more CG-2692C forms to this Report) Total Number of Persons: On Board the Vessel: 23 Injured: 0 Dead: 0 Missing: 0			

Section IV - Casualty Information (continued)

23. Was This Casualty a Serious Marine Incident (SMI) as Defined in 46 CFR 4.03-2?
 Yes No Not at this Time, But is Likely to Become an SMI (If Yes or is Likely to Become an SMI complete/attach one or more CG-2692B forms to this report)

24a. Is there any evidence of alcohol or drug use by or intoxication of individuals directly involved in the casualty?
 Yes No (If Yes, identify those individuals for whom evidence has been obtained and specify the method to obtain such evidence in block 24c)

24b. Did any individual directly involved in a casualty refuse to submit to, or cooperate in, the administration of a timely chemical test, when directed by a law enforcement officer or by the marine employer?
 Yes No (If Yes, note the individual(s) who refused in block 24c)

24c. Individuals with evidence of drug or alcohol use, evidence of intoxication, or who refused to submit/cooperate in a timely chemical test (if more space is needed, continue in block 25c)
 MASTER / OH CHANGUK, SECOND OFFICER / BAK SANGHYEON, QUARTER MASTER / BAHRUL ASKIN
 AO / SHIN SEUNGHOOON

1. ALCOHOL TEST : DIGITAL BREATH ALCOHOL DETECTOR, ALCOHAWK ABI
2. DRUG TEST : ASAN EASY TEST DOA-6

24d. Is there evidence that alcohol use contributed to this casualty?
 Yes No (If Yes, discuss in block 25b)



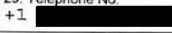
25. Nature and Circumstance of the Casualty:

25a. Activity or Operation Being Conducted at the Time of the Casualty:
 Vessel was conning by pilot to the Sunoco Dock 1 to load cargo.

25b. Description of the Casualty (casualty events and the conditions and actions that were believed to be causal factors as well as any hazards created as a result of the casualty. Attach additional sheets if necessary):
 Vessel passed a towing barge while passing Motiva Port Neches Dock and went close to the vessel berthed at Terminal. In order to avoid allision with the vessel vessel turned to port and bow of the vessel, probably only ship's port anchor, touched tug boat berthed at Motiva Port Neches Dock 1 at 2227LT 25th Nov. 2021. Vessel immediately away from the tug boat by using engine and tug boats which were taken on her starboard. Vessel resumed proceeding at 2240LT 25th Nov. 2021.

25c. Any other comments, including with respect to use of or need for emergency response equipment:

Section V - Person Making this Report

24. Name (PRINT) (Last, First, Middle) OH CHANGUK	25. Signature: 	26. Date 11/26/2021
27. Title Master	28. Address 	
29. Telephone No. +1 	30. Email GTAR@KSSFLEET.COM	