

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<br>M/V Queen City   |  | 2. Vessel Official Number or IMO Number<br>561721                  |   | 3. Vessel Flag<br>U.S.                        |  |
| 4. Vessel Length<br>102.5 <input checked="" type="checkbox"/> Feet <input type="checkbox"/> Meters |  | 5. Vessel Gross Tons<br>446  |   | 6. Vessel Propulsion Type<br>Diesel Reduction |  |
| 7. Vessel or Facility Type<br>Towboat  |  | 8. Vessel or Facility Service or Occupation<br>Inland River Towing |   |   |  |
| 9. FOR TOWING ONLY   | 9a. Arrangement:   | 9b. Number of Vessels Towed:                                       |   | 9c. Maximum Size of Tow/Tow-Boat(s):          |  |
|  | <input checked="" type="checkbox"/> Pushing Ahead<br><input type="checkbox"/> Towing Astern<br><input type="checkbox"/> Towing Alongside | Empty <u>3</u><br>Loaded <u>8</u><br>Total <u>11</u>               | Length <u>892</u> feet<br>Width <u>105</u> feet |   | 9d. Did one or more of the barges in the tow cause or sustain damage in the marine casualty?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br><i>(If Yes complete and attach one or more CG-2692A forms to this report)</i> |

**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<br>C&B Marine, LLC  |  | Telephone<br>859-746-2666   | 14. Name of Operator or Manager<br>Ingram Barge (per charter) |  | Telephone<br>615-298-8200 |
| Address<br>50 E. RiverCenter Blvd<br>Suite 1180<br>Covington, Ky 41011        |  | Email address<br>[REDACTED] | Address<br>[REDACTED]   |  | Email address             |
| 15. Name of Master or Person-In-Charge (Last, First, Middle)<br>Supple, David |  | Telephone<br>[REDACTED]     | 16. Name of Agent (Last, First, Middle)                       |  | Telephone                 |
| Address<br>[REDACTED]   |  | Email address               | Address   |  | Email address             |
| 17. Name of Dive Supervisor (Last, First, Middle)                             |  | Telephone                   | 18. Name of Pilot (Last, First, Middle)<br>Kipp, Jeremiah     |  | Telephone<br>[REDACTED]   |
| Address   |  | Email address               | Address<br>[REDACTED]   |  | Email address             |

**Section IV - Casualty Information**

|   |  |   |  |                                |
|---|--|---|--|--------------------------------|
| 19. Date/Time (local) of Occurrence<br>03/28/2023 0220  |  | 20. Location-Name of Body of Water or Waterway: Latitude:<br>Ohio River   |  | River Mile Marker:<br>OR 604.5 |
| 21. Property Damage Estimated Damage Cost(s) to:<br>Vessel: \$0 Cargo: \$UNK<br>Facility: \$UNK Other: \$UNK  |  | Describe the Extent of Property Damage<br>various and unknown degrees of damages to several barges.<br>Unknown damage to guide cell and/or dam. |  |                                |
| 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)<br>Total Number of Persons: On Board the Vessel: <u>7</u> Injured: <u>0</u> Dead: <u>0</u> Missing: <u>0</u> |  |   |  |                                |

**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)

N/A

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:

Approaching McAlpine lock s/b with 8 loads and 3 mt's

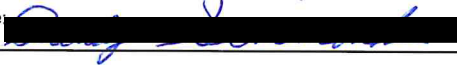


25b. Description of the Casualty (casualty events and the conditions and actions that were believed to be causal factors as well as any hazards created as a result of the casualty. Attach additional sheets if necessary.):

While approaching McAppline lock canal, side current began to set boat and tow to the stbd over towards the dam resulting in tow striking upper protective guide cell and separating from vessel

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

Emergency response plan was activated. NRC was notified. OSRO and salvage team was mobilized

**Section V - Person Making this Report**

|   |   |                        |
|---|---|------------------------|
| 24. Name (PRINT) (Last, First, Middle)<br>Simmonds, Randy   | 25. Signature<br> | 26. Date<br>03/31/2023 |
| 27. Title<br>VP Operations  | 28. Address<br>50 E. RiverCenter Blvd Suite 1180 Covington, KY 41011                                  |                        |
| 29. Telephone No.<br> | 30. Email<br>     |                        |

**BARGE ADDENDUM**

Note: This form shall be used to report data on barges causing or sustaining damage in the marine casualty described on form CG-2692.  
This form may only be used in addition to form CG-2692, never alone.

**Section I - Reporting Vessel/Facility Information - Casualty Date/Time**

|                                     |  |
|-------------------------------------|--|
| 1. Towing Vessel Name<br>Queen City | 2. Date/Time ( <i>local</i> ) of Occurrence<br>03/28/2023 0220 |
|-------------------------------------|--|

**Section II - Barge(s) Causing or Sustaining Damage**

|                             |                                      |                      |
|-----------------------------|--------------------------------------|----------------------|
| 3a. Barge Name<br>IN-065426 | 3b. Barge Official Number<br>1184152 | 3c. Barge Flag<br>US |
|-----------------------------|--------------------------------------|----------------------|

|  |                             |   |
|--|-----------------------------|---|
| 3d. Barge Length<br>195 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters | 3e. Barge Gross Tons<br>300 | 3f. Load Condition<br><input checked="" type="checkbox"/> Loaded <input type="checkbox"/> Empty |
|--|-----------------------------|---|

|                                |   |
|--------------------------------|---|
| 3g. Barge Class/Type<br>hopper | 3h. Barge Service or Occupation<br>inland river |
|--------------------------------|---|

|                                   |                         |
|-----------------------------------|-------------------------|
| 3i. Name of Barge Owner<br>Ingram | 3j. Name of Barge Agent |
|-----------------------------------|-------------------------|

|  |   |
|--|---|
| 3k. Property Damage Estimated Damage Cost(s) to:<br>Barge: \$ 150,000<br>Cargo: \$ _____ | Describe the Extent of Property Damage<br>damage to stbd bow and port 1,3,4 voids |
|--|---|

|                             |                                      |                      |
|-----------------------------|--------------------------------------|----------------------|
| 4a. Barge Name<br>IN-085041 | 4b. Barge Official Number<br>1213139 | 4c. Barge Flag<br>US |
|-----------------------------|--------------------------------------|----------------------|

|  |                             |   |
|--|-----------------------------|---|
| 4d. Barge Length<br>195 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters | 4e. Barge Gross Tons<br>300 | 4f. Load Condition<br><input checked="" type="checkbox"/> Loaded <input type="checkbox"/> Empty |
|--|-----------------------------|---|

|                                |   |
|--------------------------------|---|
| 4g. Barge Class/Type<br>hopper | 4h. Barge Service or Occupation<br>inland river |
|--------------------------------|---|

|                                   |                         |
|-----------------------------------|-------------------------|
| 4i. Name of Barge Owner<br>Ingram | 4j. Name of Barge Agent |
|-----------------------------------|-------------------------|

|  |  |
|--|--|
| 4k. Property Damage Estimated Damage Cost(s) to:<br>Barge: \$ 0<br>Cargo: \$ 0 | Describe the Extent of Property Damage |
|--|--|

|                             |                                      |                      |
|-----------------------------|--------------------------------------|----------------------|
| 5a. Barge Name<br>IN-995423 | 5b. Barge Official Number<br>1078234 | 5c. Barge Flag<br>US |
|-----------------------------|--------------------------------------|----------------------|

|  |                             |   |
|--|-----------------------------|---|
| 5d. Barge Length<br>195 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters | 5e. Barge Gross Tons<br>300 | 5f. Load Condition<br><input checked="" type="checkbox"/> Loaded <input type="checkbox"/> Empty |
|--|-----------------------------|---|

|                                |   |
|--------------------------------|---|
| 5g. Barge Class/Type<br>hopper | 5h. Barge Service or Occupation<br>inland river |
|--------------------------------|---|

|                                   |                         |
|-----------------------------------|-------------------------|
| 5i. Name of Barge Owner<br>Ingram | 5j. Name of Barge Agent |
|-----------------------------------|-------------------------|

|  |  |
|--|--|
| 5k. Property Damage Estimated Damage Cost(s) to:<br>Barge: \$ 400,000<br>Cargo: \$ 300,000 | Describe the Extent of Property Damage<br>total loss |
|--|--|

|                           |                                      |                      |
|---------------------------|--------------------------------------|----------------------|
| 6a. Barge Name<br>T-13925 | 6b. Barge Official Number<br>1057129 | 6c. Barge Flag<br>US |
|---------------------------|--------------------------------------|----------------------|

|   |                             |   |
|---|-----------------------------|---|
| 6d. Barge Length<br>200 <input type="checkbox"/> feet <input type="checkbox"/> meters | 6e. Barge Gross Tons<br>360 | 6f. Load Condition<br><input type="checkbox"/> Loaded <input checked="" type="checkbox"/> Empty |
|---|-----------------------------|---|

|                              |   |
|------------------------------|---|
| 6g. Barge Class/Type<br>tank | 6h. Barge Service or Occupation<br>inland river |
|------------------------------|---|

|                                   |                         |
|-----------------------------------|-------------------------|
| 6i. Name of Barge Owner<br>Ingram | 6j. Name of Barge Agent |
|-----------------------------------|-------------------------|

|   |  |
|---|--|
| 6k. Property Damage Estimated Damage Cost(s) to:<br>Barge: \$ 25,000<br>Cargo: \$ _____ | Describe the Extent of Property Damage<br>port side shell damage |
|---|--|

DEPARTMENT OF HOMELAND SECURITY  
U.S. Coast Guard  
**BARGE ADDENDUM**

OMB No: 1625-0001  
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Note: This form shall be used to report data on barges causing or sustaining damage in the marine casualty described on form CG-2692.  
This form may only be used in addition to form CG-2692, never alone.

**Section I - Reporting Vessel/Facility Information - Casualty Date/Time**

|                                     |  |
|-------------------------------------|--|
| 1. Towing Vessel Name<br>Queen City | 2. Date/Time ( <i>local</i> ) of Occurrence<br>03/28/2023 0220 |
|-------------------------------------|--|

**Section II - Barge(s) Causing or Sustaining Damage**

|                             |                                      |                      |
|-----------------------------|--------------------------------------|----------------------|
| 3a. Barge Name<br>IN-107048 | 3b. Barge Official Number<br>1226425 | 3c. Barge Flag<br>US |
|-----------------------------|--------------------------------------|----------------------|

|  |                             |   |
|--|-----------------------------|---|
| 3d. Barge Length<br>195 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters | 3e. Barge Gross Tons<br>300 | 3f. Load Condition<br><input checked="" type="checkbox"/> Loaded <input type="checkbox"/> Empty |
|--|-----------------------------|---|

|                                |   |  |
|--------------------------------|---|--|
| 3g. Barge Class/Type<br>hopper | 3h. Barge Service or Occupation<br>inland river |  |
|--------------------------------|---|--|

|                                   |                         |
|-----------------------------------|-------------------------|
| 3i. Name of Barge Owner<br>Ingram | 3j. Name of Barge Agent |
|-----------------------------------|-------------------------|

|   |   |
|---|---|
| 3k. Property Damage Estimated Damage Cost(s) to:<br>Barge: \$ 25,000<br>Cargo: \$ 0 | Describe the Extent of Property Damage<br>port bow damage |
|---|---|

|                             |                                      |                      |
|-----------------------------|--------------------------------------|----------------------|
| 4a. Barge Name<br>IN-155487 | 4b. Barge Official Number<br>1261816 | 4c. Barge Flag<br>US |
|-----------------------------|--------------------------------------|----------------------|

|  |                             |   |
|--|-----------------------------|---|
| 4d. Barge Length<br>195 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters | 4e. Barge Gross Tons<br>300 | 4f. Load Condition<br><input checked="" type="checkbox"/> Loaded <input type="checkbox"/> Empty |
|--|-----------------------------|---|

|                                |   |  |
|--------------------------------|---|--|
| 4g. Barge Class/Type<br>hopper | 4h. Barge Service or Occupation<br>inland river |  |
|--------------------------------|---|--|

|                                   |                         |
|-----------------------------------|-------------------------|
| 4i. Name of Barge Owner<br>Ingram | 4j. Name of Barge Agent |
|-----------------------------------|-------------------------|

|   |  |
|---|--|
| 4k. Property Damage Estimated Damage Cost(s) to:<br>Barge: \$ 25,000<br>Cargo: \$ 0 | Describe the Extent of Property Damage<br>port bow headlog |
|---|--|

|                             |                                      |                      |
|-----------------------------|--------------------------------------|----------------------|
| 5a. Barge Name<br>IN-005477 | 5b. Barge Official Number<br>1095798 | 5c. Barge Flag<br>US |
|-----------------------------|--------------------------------------|----------------------|

|  |                             |   |
|--|-----------------------------|---|
| 5d. Barge Length<br>195 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters | 5e. Barge Gross Tons<br>300 | 5f. Load Condition<br><input checked="" type="checkbox"/> Loaded <input type="checkbox"/> Empty |
|--|-----------------------------|---|

|                                |   |  |
|--------------------------------|---|--|
| 5g. Barge Class/Type<br>hopper | 5h. Barge Service or Occupation<br>inland river |  |
|--------------------------------|---|--|

|                                   |                         |
|-----------------------------------|-------------------------|
| 5i. Name of Barge Owner<br>Ingram | 5j. Name of Barge Agent |
|-----------------------------------|-------------------------|

|  |  |
|--|--|
| 5k. Property Damage Estimated Damage Cost(s) to:<br>Barge: \$ 400,000<br>Cargo: \$ 200,000 | Describe the Extent of Property Damage<br>total loss |
|--|--|

|                           |                                      |                      |
|---------------------------|--------------------------------------|----------------------|
| 6a. Barge Name<br>IB-1938 | 6b. Barge Official Number<br>1073104 | 6c. Barge Flag<br>US |
|---------------------------|--------------------------------------|----------------------|

|  |                             |   |
|--|-----------------------------|---|
| 6d. Barge Length<br>200 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters | 6e. Barge Gross Tons<br>360 | 6f. Load Condition<br><input checked="" type="checkbox"/> Loaded <input type="checkbox"/> Empty |
|--|-----------------------------|---|

|                              |   |  |
|------------------------------|---|--|
| 6g. Barge Class/Type<br>tank | 6h. Barge Service or Occupation<br>inland river |  |
|------------------------------|---|--|

|                                   |                         |
|-----------------------------------|-------------------------|
| 6i. Name of Barge Owner<br>Ingram | 6j. Name of Barge Agent |
|-----------------------------------|-------------------------|

|  |  |
|--|--|
| 6k. Property Damage Estimated Damage Cost(s) to:<br>Barge: \$ 300,000<br>Cargo: \$ 0 | Describe the Extent of Property Damage<br>port side shell damage |
|--|--|

DEPARTMENT OF HOMELAND SECURITY  
U.S. Coast Guard  
**BARGE ADDENDUM**

OMB No: 1625-0001  
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Note: This form shall be used to report data on barges causing or sustaining damage in the marine casualty described on form CG-2692.  
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**Section I - Reporting Vessel/Facility Information - Casualty Date/Time**

|                                     |  |
|-------------------------------------|--|
| 1. Towing Vessel Name<br>Queen City | 2. Date/Time ( <i>local</i> ) of Occurrence<br>03/28/2023 0220 |
|-------------------------------------|--|

**Section II - Barge(s) Causing or Sustaining Damage**

|                           |                                      |                      |
|---------------------------|--------------------------------------|----------------------|
| 3a. Barge Name<br>IB-1957 | 3b. Barge Official Number<br>1260150 | 3c. Barge Flag<br>US |
|---------------------------|--------------------------------------|----------------------|

|  |                             |   |
|--|-----------------------------|---|
| 3d. Barge Length<br>200 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters | 3e. Barge Gross Tons<br>360 | 3f. Load Condition<br><input type="checkbox"/> Loaded <input checked="" type="checkbox"/> Empty |
|--|-----------------------------|---|

|                              |   |  |
|------------------------------|---|--|
| 3g. Barge Class/Type<br>tank | 3h. Barge Service or Occupation<br>inland river |  |
|------------------------------|---|--|

|                                   |                         |
|-----------------------------------|-------------------------|
| 3i. Name of Barge Owner<br>Ingram | 3j. Name of Barge Agent |
|-----------------------------------|-------------------------|

|  |   |  |
|--|---|--|
| 3k. Property Damage Estimated Damage Cost(s) to:<br>Barge: \$ 0<br>Cargo: \$ 0 | Describe the Extent of Property Damage<br>port bow damage |  |
|--|---|--|

|                           |                                     |                      |
|---------------------------|-------------------------------------|----------------------|
| 4a. Barge Name<br>IB-1928 | 4b. Barge Official Number<br>683707 | 4c. Barge Flag<br>US |
|---------------------------|-------------------------------------|----------------------|

|  |                             |   |
|--|-----------------------------|---|
| 4d. Barge Length<br>200 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters | 4e. Barge Gross Tons<br>360 | 4f. Load Condition<br><input type="checkbox"/> Loaded <input checked="" type="checkbox"/> Empty |
|--|-----------------------------|---|

|                              |   |  |
|------------------------------|---|--|
| 4g. Barge Class/Type<br>tank | 4h. Barge Service or Occupation<br>inland river |  |
|------------------------------|---|--|

|                                   |                         |
|-----------------------------------|-------------------------|
| 4i. Name of Barge Owner<br>Ingram | 4j. Name of Barge Agent |
|-----------------------------------|-------------------------|

|  |   |  |
|--|---|--|
| 4k. Property Damage Estimated Damage Cost(s) to:<br>Barge: \$ 150,000<br>Cargo: \$ 0 | Describe the Extent of Property Damage<br>port side shell 3,4,5 and stern |  |
|--|---|--|

|                           |                                      |                      |
|---------------------------|--------------------------------------|----------------------|
| 5a. Barge Name<br>IB-1961 | 5b. Barge Official Number<br>1260154 | 5c. Barge Flag<br>US |
|---------------------------|--------------------------------------|----------------------|

|  |                             |   |
|--|-----------------------------|---|
| 5d. Barge Length<br>200 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters | 5e. Barge Gross Tons<br>360 | 5f. Load Condition<br><input type="checkbox"/> Loaded <input checked="" type="checkbox"/> Empty |
|--|-----------------------------|---|

|                              |   |  |
|------------------------------|---|--|
| 5g. Barge Class/Type<br>tank | 5h. Barge Service or Occupation<br>inland river |  |
|------------------------------|---|--|

|                                   |                         |
|-----------------------------------|-------------------------|
| 5i. Name of Barge Owner<br>Ingram | 5j. Name of Barge Agent |
|-----------------------------------|-------------------------|

|  |  |  |
|--|--|--|
| 5k. Property Damage Estimated Damage Cost(s) to:<br>Barge: \$ 0<br>Cargo: \$ 0 | Describe the Extent of Property Damage |  |
|--|--|--|

|                |                           |                |
|----------------|---------------------------|----------------|
| 6a. Barge Name | 6b. Barge Official Number | 6c. Barge Flag |
|----------------|---------------------------|----------------|

|   |                      |  |
|---|----------------------|--|
| 6d. Barge Length<br><input type="checkbox"/> feet <input type="checkbox"/> meters | 6e. Barge Gross Tons | 6f. Load Condition<br><input type="checkbox"/> Loaded <input type="checkbox"/> Empty |
|---|----------------------|--|

|                      |                                 |  |
|----------------------|---------------------------------|--|
| 6g. Barge Class/Type | 6h. Barge Service or Occupation |  |
|----------------------|---------------------------------|--|

|                         |                         |
|-------------------------|-------------------------|
| 6i. Name of Barge Owner | 6j. Name of Barge Agent |
|-------------------------|-------------------------|

|  |  |  |
|--|--|--|
| 6k. Property Damage Estimated Damage Cost(s) to:<br>Barge: \$ _____<br>Cargo: \$ _____ | Describe the Extent of Property Damage |  |
|--|--|--|