

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 <b>PRO ASSIST III</b>		2. Vessel Official Number or IMO Number <b>257007</b>		3. Vessel Flag <b>United States</b>	
4. Vessel Length <b>111.3</b> <input type="checkbox"/> Feet <input type="checkbox"/> Meters		5. Vessel Gross Tons <b>148</b>		6. Vessel Propulsion Type <b>twin screw diesel</b>	
7. Vessel or Facility Type <b>Coastwise Tugboat</b>			8. Vessel or Facility Service or Occupation <b>Ship Assist</b>		
9. FOR TOWING ONLY	9a. Arrangement	9b. Number of Vessels Towed:		9c. Maximum Size of Tow/Tow-Boat(s):	
	<input type="checkbox"/> Pushing Ahead <input type="checkbox"/> Towing Astern <input type="checkbox"/> Towing Alongside	Empty <u>NA</u> Loaded <u>NA</u> Total <u>NA</u>	Length _____ feet Width _____ 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>

**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 <b>PROASSIST III INCORPORATED</b>		Telephone <b>7875051134</b>	14. Name of Operator or Manager <b>Pedro F. Rivera</b>		Telephone <b>7875051134</b>
Address <b>1010 Orchid Street San Juan, PR 00926</b>		Email address [REDACTED]	Address <b>1010 Orchid Street San Juan, PR 00926</b>		Email address [REDACTED]
15. Name of Master or Person-in-Charge (Last, First, Middle) <b>Figueroa, Javier, Alberto</b>		Telephone [REDACTED]	16. Name of Agent (Last, First, Middle) <b>NA</b>		Telephone
Address [REDACTED]		Email address [REDACTED]	Address		Email address
17. Name of Dive Supervisor (Last, First, Middle) <b>NA</b>		Telephone	18. Name of Pilot (Last, First, Middle) <b>NA</b>		Telephone
Address		Email address	Address		Email address

**Section IV - Casualty Information**

19. Date/Time (local) of Occurrence <b>Approximately 17:15</b>		20. Location-Name of Body of Water or Waterway: <b>Caribbean Sea</b>		Latitude: <b>18.01895N</b>	River Mile Marker:
21. Property Damage Estimated Damage Cost(s) to: Vessel: <b>\$UNK</b> Cargo: <b>\$None</b> Facility: <b>\$NA</b> Other: <b>\$None</b>		Describe the Extent of Property Damage <b>Unknown at this time as salvage efforts continue.</b>			
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: <b>3</b> Injured: <b>0</b> Dead: <b>0</b> Missing: <b>0</b>					

**Section IV - Casualty Information (continued)**

23. Was This Casualty a Serious Marine Incident (SMI) as Defined in 46 CFR 4.03-27?

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)

NA

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:

The PRO ASSIST III (the " vessel " ) had just completed a ship assist service in Guayama and was returning to the Port of Yabucoa.

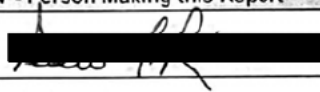

25b. Description of the Casualty (casualty events and the conditions and actions that were believed to be causal factors as well as any hazards created as a result of the casualty. Attach additional sheets if necessary.):

While sailing to Yabucoa, the seas were 5 ' to 6 ' and winds were 15 kts. At 17:15, the weather worsened with heavy showers. Deckhand Rodriguez advised Capt. Figueroa that the stern appeared to be taking on water. Engineer Hernandez advised there was water in the rudder compartment. A fixed pump in the compartment was running and removing water from the compartment. A second pump was placed in the area and began removing water. The vessel continued with power and steering. At 17:24, a wave hit the second pump and it stopped removing water. Waves increasingly hit the stern and more water was taken on. At 17:55, a call is made to the Coast Guard. Emergency preparations were taken including lifejackets and the firing of flares. The office of the vessel's owner (American Tugs Incorporated) arranged for a local vessel to pick up the crew members of the Pro Assist III. A local fishing boat responded and all three crew members were transported to shore by the fishing vessel. There were no reported injuries. The vessel later sank.

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

The vessel owner has hired a salvage company to remove fuel and oil from the vessel and raise it out of the water.

**Section V - Person Making this Report**

24. Name (PRINT) (Last, First, Middle) Rivera, Pedro, F.	25. Signature: 	26. Date 12-29-20
27. Title Owner	28. Address  San Juan, PR 00926	
29. Telephone No. 787-505-1134	30. Email 