

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

**Section I - Reporting Vessel/Facility Information**

1. Vessel or Facility Name <b>Karen Koby</b>		2. Vessel Official Number or IMO Number <b>1230122</b>		3. Vessel Flag <b>USA</b>	
4. Vessel Length <b>94.4</b> <input checked="" type="checkbox"/> Feet <input type="checkbox"/> Meters		5. Vessel Gross Tons <b>95</b>		6. Vessel Propulsion Type <b>Diesel</b>	
7. Vessel or Facility Type <b>Tug</b>		8. Vessel or Facility Service or Occupation <b>Towing</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	Empty <b>0</b>	Length <b>290</b> 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 checked="" type="checkbox"/> Towing Astern	Loaded <b>1</b>	Width <b>70</b> feet		
<input type="checkbox"/> Towing Alongside	Total <b>1</b>				

**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 \$25,000
  - 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 - Reporting Person Information (Fill in as Applicable)**

13. Name of Owner <b>LA Carriers, LLC</b>		Telephone <b>9856935858</b>	14. Name of Operator or Manager		Telephone
Address <b>PO BOx 1626 Larose, LA 70373</b>		Email address [REDACTED]	Address		Email address
15. Name of Master or Person-in-Charge (Last, First, Middle) <b>Charles Chester Murphy</b>		Telephone [REDACTED]	16. Name of Agent (Last, First, Middle)		Telephone
Address		Email address [REDACTED]	Address		Email address
17. Name of Dive Supervisor (Last, First, Middle)		Telephone	18. Name of Pilot (Last, First, Middle)		Telephone
Address		Email address	Address		Email address

**Section IV - Casualty Information**

19. Date/Time (local) of Occurrence <b>15 June 2022 0345</b>		20. Location-Name of Body of Water or Waterway: <b>Gulf of Mexico</b>		Latitude: <b>29.17.9.08</b>	OR	River Mile Marker:
				Longitude: <b>92.36.57.38</b>		
21. Property Damage Estimated Damage Cost(s) to: Vessel: \$ _____ Cargo: \$ <b>Unknown</b> Facility: \$ _____ Other: \$ _____		Describe the Extent of Property Damage <b>MV Karen Koby sustained no damage</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>4</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 4.03-2?

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)

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:

Towing operation. Tug towing barge ambition astern

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.):

M/V Karen Koby was towing the crane barge Ambition on 15 June 2022 at approximately 0400 the crane barge rolled over to port and became partially submerged.

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

Section		26. Date
24. Name (PRINT) (Last, First, Middle) Johnny R. Plaisance	25. Signature 	20 June 2022
27. Title Manager	28. Address 	
29. Telephone No. 985 693 5858	30. Email 	

U.S. Coast Guard

Exp. Date: 07/31/2022

**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 <i>M/V Karen Kobay</i>	2. Date/Time (local) of Occurrence <i>15 June 2022 - 0345</i>
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**Section II - Barge(s) Causing or Sustaining Damage**

3a. Barge Name <i>Ambition</i>	3b. Barge Official Number <i>Unknown</i>	3c. Barge Flag <i>Unknown</i>
3d. Barge Length <i>195</i> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters	3e. Barge Gross Tons <i>Unknown</i>	3f. Load Condition <input checked="" type="checkbox"/> Loaded <input type="checkbox"/> Empty
3g. Barge Class/Type <i>Crane Barge</i>	3h. Barge Service or Occupation <i>Crane/Deck</i>	
3i. Name of Barge Owner <i>Rigid Constructors</i>		3j. Name of Barge Agent

3k. Property Damage Estimated Damage Cost(s) to: Barge: \$ <i>Unknown</i> Cargo: \$ <i>Unknown</i>	Describe the Extent of Property Damage <i>Barge was being towed when it began to list to the port side then rolled over</i>
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4a. Barge Name	4b. Barge Official Number	4c. Barge Flag
4d. Barge Length <input type="checkbox"/> feet <input type="checkbox"/> meters	4e. Barge Gross Tons	4f. Load Condition <input type="checkbox"/> Loaded <input type="checkbox"/> Empty
4g. Barge Class/Type	4h. Barge Service or Occupation	
4i. Name of Barge Owner		4j. Name of Barge Agent

4k. Property Damage Estimated Damage Cost(s) to: Barge: \$ _____ Cargo: \$ _____	Describe the Extent of Property Damage
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5a. Barge Name	5b. Barge Official Number	5c. Barge Flag
5d. Barge Length <input type="checkbox"/> feet <input type="checkbox"/> meters	5e. Barge Gross Tons	5f. Load Condition <input type="checkbox"/> Loaded <input type="checkbox"/> Empty
5g. Barge Class/Type	5h. Barge Service or Occupation	
5i. Name of Barge Owner		5j. Name of Barge Agent

5k. Property Damage Estimated Damage Cost(s) to: Barge: \$ _____ Cargo: \$ _____	Describe the Extent of Property Damage
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6a. Barge Name	6b. Barge Official Number	6c. Barge Flag
6d. Barge Length <input type="checkbox"/> feet <input type="checkbox"/> meters	6e. Barge Gross Tons	6f. Load Condition <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: Barge: \$ _____ Cargo: \$ _____	Describe the Extent of Property Damage
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**INSTRUCTIONS FOR COMPLETION OF FORM CG-2692A  
BARGE ADDENDUM**

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The Coast Guard estimates that the average burden for this report is .5 hours. You may submit any comments concerning the accuracy of this burden estimate or any suggestions for reducing the burden to: Commandant (CG-INV), U.S. Coast Guard Stop 7501, 2703 Martin Luther King Jr Ave SE, Washington, DC 20593-7501 or Office of Management and Budget, Paperwork Reduction Project (1625-0001), Washington, DC 20503.

**WHEN TO USE THIS FORM**

1. This form, when submitted in conjunction with a CG-2692, satisfies the requirement for written reports of casualties and accidents found in the Code of Federal Regulations for vessels. Specifically, it provides information on one or more barges that cause or sustain damage as a result of their involvement in a reportable marine casualty. This form may only be used in addition to form CG-2692, never alone.
2. One or More Barges as Part of a Tow. This form shall be used to enter information on all barges that were part of the tow and that caused or sustained damage as a result of the marine casualty reported on the CG-2692.
3. Multiple Anchored or Moored Barges. This form shall be used to enter information on multiple barges that were moored or anchored (such as in a fleeting area) and either cause or sustained damage or broke away and caused or sustained damage during an incident that meets the criteria of a marine casualty required to be reported on a CG-2692.
4. This form should not be use if the incident involves only a single barge while moored or anchored. This type of incident shall be documented as any other vessel using the CG-2692.

**COMPLETION OF THIS FORM**

5. In accordance with 46 CFR §4.05-10 this form shall be filled out as completely and accurately as possible. Please type or print clearly. Fill in all blanks that apply to the kind of accident that has occurred. If a block is not applicable, the abbreviation "NA" should be entered in that space. If the answer is unknown and cannot be obtained before the report has to be submitted (i.e. within 5 days of the accident), the abbreviation "UNK" should be entered in that block. If "NONE" is the correct response, enter it in the block.
6. If more than 4 barges caused or sustained damage in the marine casualty additional CG-2692As should be completed necessary to enter the required information for all barges.
7. Once completed, deliver, email, or fax this form with a corresponding CG-2692 within 5 days of the casualty to the Coast Guard Sector, Marine Safety Unit, or Activity nearest the location of the casualty or, if at sea, nearest the arrival port. <https://www.uscg.mil/Units/Organization/>

**NOTICE:** The information collected on this form is routinely available for public inspection. It is needed by the Coast Guard to carry out its responsibility to investigate marine casualties, to identify hazardous conditions or situations and to conduct statistical analysis. The information is used to determine whether new or revised safety initiatives are necessary for the protection of life or property in the marine environment.