



U.S. COAST GUARD WITNESS / INVESTIGATOR STATEMENT FORM

Witness Name: William Sweeney (Please Print Clearly) Employer Name: Alexis marine LLC  
 Street Address: [REDACTED] Employer Address: 2304 Engineers Rd suite B  
 City/State/Zip: [REDACTED] City/State/Zip: Belle Chasse, LA 70037  
 Phone No: [REDACTED] Phone No: (504) 501-0000  
 Position: Captain License/Doc. # \_\_\_\_\_

I, the undersigned, make the following statement voluntarily, without threat, duress or promise of reward:

After making 81 mile BOW noticed the Boat lean to the Port side. Went to the next BOW noticed the Boat started to the Port side. Thought the Boat was walking up the barge. So when we got in the straight away loosen up the face wires to let it settle down. the Boat started lean even more to the Port side. Called on channel 67 for assistance. The CSS Richmond came to assist. Sounded the general alarm soon as I noticed something was wrong. We got 2 pumps on the uncle Blue. every one got back off the Boat. Started to come up then it when down faster.

I have read my statement as documented above (and, if applicable, on continuation pages), and to the best of my knowledge and belief, it is true and correct.

SIGNATURE

DATE

3 26 29



## U.S.C.G. Privacy Act Statement

**PRIVACY ACT STATEMENT** The investigator of this incident wishes to obtain your name, address, telephone number, and place of employment. In order for the investigator to collect this private information, the Privacy Act (5 U.S.C. 552a(e)(3)) requires that you be informed concerning the authority of the investigator to collect this information; the primary purpose for which the Coast Guard will use this information; any secondary purpose for the information; and whether your disclosure of this information is voluntary or required by law.

1. **Authority.** The investigator, as a Federal law enforcement officer (14 U.S.C. 93e and E.O. 11735 of August 3, 1973), is requesting this information pursuant to the authority contained in (46 U.S.C. 6301 et seq), Investigating Marine Casualties, and/or the Federal Water Pollution Control Act (FWPCA), as amended (33 U.S.C. 1321 et seq), and regulations to enforce these laws.
2. **Principal Purpose for this information.** The statement which you provide the investigator will be used to determine the cause of this incident. Your name, address, and other personal information is needed to enable the investigator to contact you if more information is needed or to clarify aspects of your statement. Your identity and contact information is needed to use your statement at proceedings which may result from this investigation. The investigations of marine casualties and accidents and the determinations made are for the purpose of taking appropriate measures for promoting safety of life and property at sea, and not intended to fix civil or criminal responsibility.
3. **Other purposes for this information.** No other uses for this information are intended.
4. **The disclosure of your personal information (name, address, and phone number) is voluntary.**



U.S. COAST GUARD WITNESS / INVESTIGATOR STATEMENT FORM

(Please Print Clearly)

Witness Name: Eric Washington  
Street Address: [REDACTED]  
City/State/Zip: [REDACTED]  
Phone No: [REDACTED]  
Position: Captain

Employer Name: Alexis Marine LLC  
Employer Address: 2304 Engineers Rd Suite B  
City/State/Zip: Belle Chasse, LA 70027  
Phone No: (504) 301-0000  
License/Doc. #: 008209549

I, the undersigned, make the following statement voluntarily, without threat, duress or promise of reward:

*I was woken up to the Boat sinking and the General alarm. Capt. on watch hit General Alarm to alert everyone we made sure everyone was off the boat and accounted for on the barge in tow. We tried putting pumps on the boat to attempt to save it, after setting everything up it didnt help with the sinking we stayed on the ~~boat~~ barge after attempting to pump the boat.*

I have read my statement as documented above (and, if applicable, on continuation pages), and to the best of my knowledge and belief, it is true and correct.

[REDACTED SIGNATURE]  
SIGNATURE

3/26/23  
DATE



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U.S. COAST GUARD WITNESS / INVESTIGATOR STATEMENT FORM

(Please Print Clearly)

Witness Name: Christopher Barnes Employer Name: 'Alexis Marine  
 Street Address: [REDACTED] Employer Address: 2304 Engineers Rd  
 City/State/Zip: [REDACTED] City/State/Zip: Belle Chasse, La, 70037  
 Phone No: [REDACTED] Phone No: 504-301-0000  
 Position: Deckhand License/Doc. # \_\_\_\_\_

I, the undersigned, make the following statement voluntarily, without threat, duress or promise of reward:

In the straight away before mile marker 81, went down and checked the engine room every thing was good. Returned back to the wheelhouse then heard the bilge alarm going off. While checking on the alarm noticed the engine room was filling up with water. I then notified the Captain who then rung the general alarm to wake up fellow crew members to evacuate the vessel.

I have read my statement as documented above (and, if applicable, on continuation pages), and to the best of my knowledge and belief, it is true and correct.

[REDACTED]  
 SIGNATURE

03/26/2023  
 DATE



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U.S. COAST GUARD WITNESS / INVESTIGATOR STATEMENT FORM

(Please Print Clearly)

Witness Name: Tyrome Lamark Employer Name: Alexis Marine LLC  
 Street Address: [REDACTED] Employer Address: 2304 Engineers RD STE B  
 City/State/Zip: [REDACTED] City/State/Zip: Belle Chasse LA 70037  
 Phone No: [REDACTED] Phone No: 504(301) 1000  
 Position: Leadman License/Doc. # \_\_\_\_\_

I, the undersigned, make the following statement voluntarily, without threat, duress or promise of reward:

Sleeping I was awakened by the general alarm, so I followed protocol and made sure everyone was at the muster station waiting for instruction from the captain on watch or (P.I.C) we were then instructed to get on the barge we were connected to until further instructed

I have read my statement as documented above (and, if applicable, on continuation pages), and to the best of my knowledge and belief, it is true and correct.

[REDACTED SIGNATURE]  
SIGNATURE

3/26/23  
DATE



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U.S. COAST GUARD WITNESS / INVESTIGATOR STATEMENT FORM

(Please Print Clearly)

Witness Name: Brycen Bush Employer Name: Alexis Marine LLC  
 Street Address: [REDACTED] Employer Address: 2304 Engineers RD STE 13  
 City/State/Zip: [REDACTED] City/State/Zip: Belle Chase LA 70037  
 Phone No: [REDACTED] Phone No: (504) 301-0000  
 Position: Deck hand License/Doc. # \_\_\_\_\_

I, the undersigned, make the following statement voluntarily, without threat, duress or promise of reward:

woke up to the sound of the alarm going off then the captain told us to go on the fleet DECK after we tried to pump the water out the engine room then after the captain seen that we could not control the amount of water that was coming in to the Boat the captain told us to go on the Barge for safety

I have read my statement as documented above (and, if applicable, on continuation pages), and to the best of my knowledge and belief, it is true and correct.

[REDACTED]  
SIGNATURE

03/26/23  
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U.S. COAST GUARD WITNESS / INVESTIGATOR STATEMENT FORM

Witness Name: Michael Smith Jr Please Print Clearly Employer Name: ALEXIS MARINE  
 Street Address: [REDACTED] Employer Address: 2304 Engineers Rd Suite B  
 City/State/Zip: [REDACTED] City/State/Zip: Belle Chasse, LA 70037  
 Phone No: [REDACTED] Phone No: (504) 301-0600  
 Position: DECKHAND License/Doc. # \_\_\_\_\_

I, the undersigned, make the following statement voluntarily, without threat, duress or promise of reward:

Tyrone woke me up alerted me to get up and meet at the MUSTER STATION after that we were instructed to VACATE THE BOAT AND get ON THE DARGE UNTIL FURTHER INSTRUCTIONS

I have read my statement as documented above (and, if applicable, on continuation pages), and to the best of my knowledge and belief, it is true and correct.

Michael Smith Jr  
SIGNATURE

03 26 23  
DATE



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