



## Vessel port performance survey

QA processes / Customer satisfaction / PRD-107

FRM-203

Vessel:	Port:	Date:
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Dear Sirs

In order for us to evaluate how well we meet the requirements of the terminals our vessels visit, please assist us by taking a few moments to complete the following questionnaire.

		<i>(Please tick a box)</i>			
		YES	NO		
1.	Was a suitable ship and shore safety/cargo operation briefing held before cargo operations took place?	<input type="checkbox"/>	<input type="checkbox"/>		
2.	Did the vessel fully comply with all legislation whilst at your terminal?	<input type="checkbox"/>	<input type="checkbox"/>		
3.	Were the vessel's communications correct, prompt and understandable?	<input type="checkbox"/>	<input type="checkbox"/>		
4.	Were the ship's staff co-operative, contactable and of smart appearance?	<input type="checkbox"/>	<input type="checkbox"/>		
5.	Did the vessel's cargo performance meet your requirements/expectations?	<input type="checkbox"/>	<input type="checkbox"/>		
6.	Do the vessel's dimensions and equipment suit your terminal's requirements?	<input type="checkbox"/>	<input type="checkbox"/>		
7.	Were any problems encountered during this visit? <i>(If "Yes", please describe briefly below.)</i>	<input type="checkbox"/>	<input type="checkbox"/>		
8.	Are there any outstanding actions from vessel's previous visits to your port?	<input type="checkbox"/>	<input type="checkbox"/>		
9.	Would you like to see this vessel return to handle another cargo at your terminal?	<input type="checkbox"/>	<input type="checkbox"/>		
10.	Please provide an overall rating of the vessel compared to others calling at your terminal? <i>(Please tick the appropriate box below; number system for BP use only.)</i>				
	Unacceptable (1)	Poor (2)	Average (3)	Above average (4)	Excellent (5)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any additional comments / improvements:					
What does this vessel have to do to achieve an excellent rating?					
<div style="border: 1px solid black; padding: 5px; width: fit-content; margin-left: auto;">Terminal stamp (if available)</div>					
Name:			Signature:		
Position:			Contact telephone:		
Email:					

By analysing these replies, we aim to match our vessels' performance with the requirements of terminals and customers worldwide. Your help in this matter is therefore very important and we thank you for your time and attention. Please return this form to the Master, together with any comments you may like to add. Alternatively you can email this survey directly to BP Shipping, and cc the vessels. If you wish to send directly please email [GBPSFleetOpsPPPerformance@uk.bp.com](mailto:GBPSFleetOpsPPPerformance@uk.bp.com)

