AD NO.: 03q-00

Initial Issue Date: 09-14-2023

Revision Date: 00

**REPUBLIC OF THE PHILIPPINES**

**DEPARTMENT OF TRANSPORTATION**

**MARITIME INDUSTRY AUTHORITY**

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| **INVENTORY OF TRAINING EQUIPMENT AND FACILITIES** |

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| **Training Course:** | Ratings Forming Part of a Watch in a Manned Engine-room or designated to perform duties in a Periodically Unmanned Engine-room |
| **Name of Maritime Training Institution:** |  |

| *Note: Sharing of Facilities and Equipment may be allowed provided that Names of the Branches that will be utilizing the same must be reflected* | **Self-Assessment** | **Tabletop Evaluation** | **Inspection** | **Remarks** |
| --- | --- | --- | --- | --- |
| **To be accomplished by applicant MTI** | **To be accomplished by designated Tabletop Evaluator** | **To be accomplished by designated Evaluation and Inspection Team (EIT)** |
| **Items** | **Quantity Required** | **Actual number at hand** | **Complied** | **Not Complied** | **Complied** | **Not Complied** |
| **Equipment:** |
| * Engine Room Simulator (ERS) with:
* Instructor’s station including audio & visual equipment
* at least two (2) trainee’s work stations

*NOTE:** *Equipment to trainee ratio is 1:4*
* *For the practical exercise of Topic 5, MTI may opt to use ERS or mock engine room*
* *For the practical exercise of Topic 6, MTI may opt to use ERS or actual marine boiler*
 | 1 unit |  |  |  |  |  |  |
| * Personal Protective Equipment
* Helmet/Hard hat
* Ear muffs/Ear plugs
* Eye Goggles
* Safety Shoes
* Cover all
* Hand gloves
* Disposable face mask
 | 25 pcs each |  |  |  |  |  |  |
| * Equipment/machinery to be used for electrical work in an engine room operations
 | 1 unit |  |  |  |  |  |  |
| * Equipment/machinery to be used for mechanical work in an engine room operations
 | 1 unit |  |  |  |  |  |  |
| * Any equipment/machinery to be used for the following engine room operations:
* refueling
* working aloft or over the side
* safe access to and from the vessel
* welding or hot work
* personal lifting
* confined spaces
 | 1 unit |  |  |  |  |  |  |
| * Hand-held Two-Way Radio
 | 6 units |  |  |  |  |  |  |
| * Emergency Escape Breathing Device (EEBD)
 | 2 units |  |  |  |  |  |  |
| The following first aid equipment permanently marked “**FOR EMERGENCY PURPOSES ONLY”** shall be available:* First aid kit;
* Standard stretcher; and
* Resuscitation kit with oxygen/suction unit
 | 1 set |  |  |  |  |  |  |

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| **Accomplished by** | **:** |  |  | **Date** | **:** |  |
|  |  | Name and Signature ofMTI’s Authorized Representative |  |  |  |  |

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| **Table Top Evaluator’s Comments:** |
|  |  |  | **Date of Evaluation** |  |  |  |
|  | **Table Top Evaluator’s Name & Signature** |  |  |  |  |  |
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| **Inspector’s Comments:** |
|  |  |  | **Date of Inspection** |  |  |  |
|  | **Inspector’s Name & Signature** |  |  |  |  |  |
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