				H B	Salar E E Salar	I Was I have been been been been been been been be			
REPORT NR: 01-201:	2	REQUEST FOR COR ACTIONS FO	DDECTIVE		MNC	NR:			
			OR:>	X	NC ·	NR: 00000001			
					OBS	NR:			
X SHIP	OFFICE	M/v: CARNIVAL TI	RIUMPH						
		TYP	E OF ACTIVIT	Υ:					
☐ SMS INTERN									
AUDITED AREA/DEF									
REFERENCE DOCUM	IENTATION:	STCW Code Section A-	VI/1 Para. 1.7.		-				
During review of the sai	ety familiarizat	(To be fi	rrandam III 1	• •	t splashtight d	oors or fire screen doors were ne			
		POSS	IBLE CAUSES	3:		opin anone member.			
X Procedures we		1	L	ack of con	nmunication/	coordination			
Lack of Trainin	ıg			Other					
Name and signature of	the Auditor:	Theodore Moscynski	1	6	-	Control francis			
			(These fields r	are mands	tory) S	DORE MOSCYNSKI -8-GOMPLIANCE PERINTENDENT			
ProposedCorrective Ac	tion Dif	ferent door types to be in	cluded in familia	arization tr	aining	1011)			
ProposedPreventive Ac	tion In c	In order to prevent recurrence responsible shipboard management to recommend that shoreside at fleetwife training video							
PROPOSED SOLUTI 12-18-2012	PROPOSED SOLUTION DATE:			MASTER/RESPONSIBLE PERSON (OFFICE) VITTORIO MARCHI					
DATE			D.P.A. (OR DELECATE): (NAME/POSITION/SIGNATURE)						
VE	RIFICATION	(For Oil	CTION 3			ACTIONS			
ACTION ISSUED -	(SEE NOTES	AND ACTIONS LISTS	DATE:	VERIFII		a o			
CORRECTLY AND	TIMELY IMI		12:7:12	VERIFIE	DBY:	ZTHEODORE MOSCYRISM			
OTES (IF ANY)						ZTHEODORE MOSCYNSKI ISM & COMPHANCE SUPERINTENDENT			
ATE:				-	CLOSE O	AT I'P			
			D.P.A. (OR DELEGATE): (NAME/POSITION/SIGNATURE)						

				MO IN CLUS			
REPORT NR: 01-2012	REQUEST FOR	CORRECTIVE S FOR:>	MNC NC	NR: NR: 00000002			
		SFOR:	OBS	NR:			
X SHIP OF	FICE M/v: CARNIVAL	TRIUMPH					
	T	YPE OF ACTIVIT	Y:				
SMS INTERNAL AU	DIT						
AUDITED AREA/DEPT: DEC							
REFERENCE DOCUMENTA:	TION: SMS/DECK/P004 Li	feboats Inspections	- Checks to be sond	11.0			
		SECTION 1:	Checks to be conduct	ed before and after recovery			
DESCRIPTION	(To be	o filled by the and	itor)				
DESCRIPTION: (ADDING ANY IMM	EDIATE CORRECTIVE ACTION IS ADDISO	4.Th) ===	•				
During inspection of lifeboats, 2 arrangements while the ship was	boats (14 forward hook and	16 aft hook) were f	found to have fall preven	ntion pins inserted into the hook			
X Procedures were not for	ollowed	OSSIBLE CAUSES					
Lack of Training	- Charles		ack of communication	/coordination			
	324		ther				
Name and signature of the Au			/ .	THEODORE MOSCYNSKI ISM & COMPLIANCE			
	SECTION	V 2 - (These fields	are mandatory)	SUPERINTENDENT			
ProposedCorrective Action	Before every departure th	person responsib	le of the corrective ac	tion)			
	CCL Shoreside to review	existing checklists	eck all lifeboats to ensur	re all pins have been removed. it as regular pre-departure check.			
ProposedPreventive Action	In order to prevent recurr	ence responsible ch	in management to to	C			
	Lagran Sympton Politory 11212	and consider to inc	clude it as regular pre-de	inate with CCL Shoreside to			
PROPOSED SOLUTION DA	TE:	MASTER	RESPONSIBLE POR	SON (OFFICE			
12-18-2012		VITTORI	VITTORIO MARCHI				
DATE							
			ON/SIGNATURE)				
	For	SECTION 3 Office Use Only)					
VERIFICA	TION ON INPLEMENTA	TION OF PROPO	SED CORRECTIVE	ACTIONS			
LYDDILLOWYT KEOOF21 F	OR CORRECTIVE	I DATE: 1		ACTIONS			
ACTION ISSUED - (SEE N	OTES AND ACTIONS LIST	)	VERIFIED BY:	a -unarranger			
CORRECTLY AND TIME	Y IMPLEMENTED	12.7.12	VERIFIED BY:	THRODORE MICHAEL			
OTES (U ANY)				SUPPLIE			
	15-2			No. 1			
ATE:			CLOSE OUT				
		D.P.A. (OR DELE	GATE)·				
		(NAME/POSITION/SIGN	ATURE)				

## SMS Procedures Carnival

REPORT NR: 01-2012		DEOUTERTON		MNC	IN IN CHOO		
	16	REQUEST FOR CO	DRRECTIVE	X NC	NR:		
		ACTIONS	FOR: ->	OBS	NR: 00000003		
X SHIP	OFFICE	M/v: CARNIVAL T	RIUMPH	U OBS	IVR:		
		TY	PE OF ACTIVI	ΓY:			
SMS INTERN							
AUDITED AREA/DEP							
REFERENCE DOCUM	ENTATION:	SMS/OH&S/P009 Wor	k Requiring Loc	kout and Tagout			
DESCRIPTION: (ADDING	ANY IMMEDIATE C	(To be f	SECTION 1: illed by the aud	litor)	ors to an elevator shaft and enter		
		POS	SIBLE CAUSE				
X Procedures wer		d	XI	ack of communication/	coordination		
Lack of Training				Other			
Name and signature of	the Auditor:	Theodore Moscynski	Dr		EUUUDE MUGUANGAI		
		SECTION 2	- (These fields	are mandatory) ble of the corrective act	ECOCORE MOSCYNSKI ISM & COMPLIANCE SUPERINTENDENT		
ProposedCorrective Act	did	ntractors went through th	e required CCI	Familiarization Training. e commencing of the wor			
ProposedPreventive Acti	on In c	order to prevent recurrent	ce shipboard per d for permits en	connel should review	tract work onsite and when job egin until policies are assured of		
PROPOSED SOLUTIO	ON DATE:			P/PESPONETRY PARTY	IN THE		
12-18-2012		4	MASTER/RESPONSIBLE PERSON (OFFICE) VITTORIO MARCHI				
DATE			D.P.A. (OR DELEGATE): (NAME/POSITION/SIGNATURE)				
VER	IFICATION	(For O	ECTION 3				
ACTION ISSUED - (	SEE NOTES.	AND ACTIONS LIST	DATE:	VERIFIED BY:	CTIONS		
/ CODDECTIVE AND THE			12.7.12	VERIFIED BY:	DECORORE MOSITINISM		
NOTES HIR STON			- 7.14		SUPERINTENDENT		
ATE:				CLOSE O	UT		
			D.P.A. (OR DELEGATE): (NAME/POSITION/SIGNATURE)				

					AF Y	TOTAL DE CONTRA LA	E land E land land land land land		
REPORT NR: 01-2012			REQUEST FOR CORRECTIV			MNC	NR:		
			ACTIONS F	OR:		NC	NR:		
So arm					X	OBS	NR: 00000001		
X SHIP	U OF	FICE	M/v: CARNIVAL T	RIUMPH					
			TYI	PE OF ACTIVIT	Y:				
	TERNAL AU								
AUDITED AREA									
REFERENCE DO	CUMENTAT	TION: S	OLAS II-2, Regulation	15, Para. 2.3.4.4	4.				
DESCRIPTION: On review of the f	(Adding any imm ire fighting tra	EDIATE COR	(To be fi	ECTION 1: illed by the audi	tor)	that the manual	did not contain details of the		
				SIBLE CAUSES	:				
X Procedure	es were not fo	llowed				mmunication/co	ordination		
Lack of T	raining				Lack of communication/coordination  Other				
Name and signatu	ire of the Au	ditor: T	heodore Moscynski	THEODORE MOSCYNSKI					
SANTETERSON	Mr 7245 3	nest from	The state of the s	(.'-		7.	ISM & COMPLIANCE SUPERINTENDENT		
			(To be filled by the p	- (These fields a	re mand	agory)			
ProposedCorrecti	ve Action	Item	added, corrected	стори теаринаци	ie or the	corrective actio	n)		
ProposedPreventiv	ve Action	To princlu	To prevent recurrence responsible shipboard management should ensure updates are verified as included in crew manuals						
PROPOSED SOLUTION DATE: 12-18-2012			MASTER/RESPONSIBLE PERSON (OFFICIAL VITTORIO MARCHI						
DATE	DATE			D.P.A. (OR DELEGATE): (NAME/POSITION/SIGNATURE)					
	VERIFICA	TION (	SI (For O ON INPLEMENTATI	ECTION 3  ffice Use Only) ON OF PROPO	SED CO	DDFCTIVE	TTIONIC		
ACTION ISSU	REQUEST F JED - (SEE N	OR COF OTES A	RECTIVE ND ACTIONS LIST)	DATE:		ED BY:	TIONS		
CORRECTLY	AND TIME	Y IMPI	EMENTED	12.7.12	VERIFI	ED BY:	L THEODORE MOSCHNER		
OTES:(IF ANY)						· (è	SUPERINTENDENT .		
ATE:				CLOSE OUT					
				D.P.A. (OR DELEGATE): (NAME/POSITION/SIGNATURE)					

REPORT NR: 01-2012							
10.1 OR1 14K. 01-2012	REQUEST FOR CO	ORRECTIVE	MNC	NR:			
3	ACTIONS	FOR: →	NC NC OBS	NR:			
X SHIP O	FFICE M/v: CARNIVAL T	ГВПІМРИ	X OBS	NR: 00000004/			
SMS INTERNAL AT	JDIT 11	PE OF ACTIVIT	Y:				
AUDITED AREA/DEPT: DE							
	TION: SMS/EMERGENCY/F	2002 Fire on Boar					
		SECTION 1:					
DESCRIPTION	(To bo)	60 a 1	tor)				
Fire and Abandon Ship Drill	MEDIATE CORRECTIVE ACTION IS ADDITION						
backstage area, the following w	as noted:	on ship drill on Oc	tober 20, 2012, which:	incorporated a simulated fire in the			
- Fire Plans - Fire plans were n	ot available to the on same						
affected area with a free flow of	paratus Air Management - One:	member of the Qu	ick Response Team (Q)	RT) was observed to enter the fire			
- Boundary Control and Bound	ary Cooling - The engage in-	32.4.1					
boundary cooling being applied	to areas in a different fire zone.	. Additionally, cre	g the fire were not prop	erly identified resulting in			
affected area			"Moniocis were anow	ed to pass directly over the fire			
V Procedures	POS	SIBLE CAUSES:		- toni			
X Procedures were not f	ollowed	La	ck of communication/	coordination			
☐ Lack of Training		Ot	her &	$\gamma$			
Name and signature of the Au	ditor: Theodore Moscynski	1/2		THEODORE MOSCYNSKI ISM & COMPLIANCE			
aleasta jaraaleen	6 Latest days	- (These fields a	ra mandata and	SUPERINTENDENT			
	(To be filled by the p	erson responsible	of the corrective act	(on)			
roposedCorrective Action	Conditions for improvemen	t noted are to he re	eviewed by shipboard s	enior management and during the			
none and	The state of the s						
roposedPreventive Action	In order to prevent recurren	ce shipboard mana	gement, after review or	f recommendations, will institute			
PROPOSED SOLUTION DA	The second as appropriat	c,		N 155			
12-18-2012	.I.C.	MASTER/RESPONSIBLE PERSON (OFFICE) VITTORIO MARCHI					
DATE			4	2 - 10 11			
DAIE	D.P.A. (OR DELEGATE): (NAME/POSITION/SIGNATURE)						
		ECTION 3					
VERIFICA	(For O	ffice Use Only)		34.5			
ADDITIONAL REQUEST F	ATION ON INPLEMENTATION CORRECTIVE	DATE:	SED CORRECTIVE	ACTIONS			
ACTION ISSUED - (SEE N	DATE,	VERIFIED BY:	THEODORE MOSCHASK				
CORRECTLY AND TIME	12.7.12	VERIFIED BY:	SUPERINTENDENCE				
OTES (IF ANY)			( e	/-			
ATE:		CLOSE OUT					
	D.I			E. Carlotte			
				D.P.A. (OR DELEGATE): (NAME/FOSITION/SIGNATURE)			

# SMS Procedures & Carnival

			B B	n. 18 11 America 18 All.				
REPORT NR: 01-2012	REQUEST FOR C	ORRECTIVE		MNC	NR:			
1	ACTIONS	FOR: →		NC	NR:			
		H	X	OBS	NR: 00000005 Z			
X SHIP OF	FICE M/v: CARNIVAL	TRIUMPH		7				
	TY	PE OF ACTIVIT	Y:					
SMS INTERNAL AU								
AUDITED AREA/DEPT: HO	TEL							
REFERENCE DOCUMENTA	TION: CCL Procedure Time	& Attendance Rec	ord and ILO	180				
		SECTION 1:						
DESCRIPTION	(To be	filled by the and	tor)					
DESCRIPTION: (ADDING ANY IMM	EDIATE CORRECTIVE ACTION, IF APPLICAL	BLE)						
On review of closed and approv On interview with one crewmen	ed pay periods, records indicate	ted that some crew	members w	orked in excess	of 14 hours on some days.			
On interview with one crewmen actually worked indicating that,					s recorded reflected the hours			
, and a sure	The state of the s	as not the least of	an administr	ative error.				
X Procedures were not for	ollowed	SSIBLE CAUSES						
Lack of Training			Lack of communication/coordination					
		D-9	ther (	THEODO	DRE MOSCYNSKI B COMPLIANCE			
Name and signature of the Au-	ditor: Theodore Moscynski	4		/ SUF	ERINTEMPENT			
	SECTION	2 - (These fields a	re mandato	ry) Market	and the terretain and the state of the state of			
	(To be filled by the	person responsib	le of the cor	rective action	)			
ProposedCorrective Action	Responsible managers to r	eview accummulat	ing hours mo	ore closely duri	ng the two week pay periods			
ProposedPreventive Action	In order to prevent recurre	Responsible managers to review accumulating hours more closely during the two week pay periods  In order to prevent recurrence responsible shipboard management should closely monitor hours and make schedule adjustments as needed.						
PROPOSED SOLUTION DA	TE:		PESPONS	mis penson	- LAA-			
12-18-2012		MASTER/RESPONSIBLE RERSON (OFFICE) VITTORIO MARCHI						
DATE		D.P.A. (0)						
	5	SECTION 3	IN/SIGNATURE)					
VERIFICA		Office Tice Only)	ARD 60-		A			
ADDITIONAL REQUEST F	OR CORRECTIVE	DATE:	SED CORE	ECTIVE ACT	TIONS			
ACTION ISSUED - (SEE N	OTES AND ACTIONS LIST)	DAIE.	VERIFIED	BY:				
CORRECTLY AND TIME	LY IMPLEMENTED		VERIFIED	DV.	F			
NOTES XIT ANY)		12.7.12	VERGIED	51://	WEDDORF MOSONSO			
				3.1	HEODORE MASSONSON ISM & COMPLIANCE SUPERINTERIDENT			
DATE:				CLOSE OUT				
		D.P.A. (OR DELE	GATE):					
		, and the state of	MI UKE)					