

STATE OF HAWAII  
DEPARTMENT OF TRANSPORTATION  
HARBORS DIVISION  
**PIPELINE TOLL REPORT (STATE)**

CHECK IF:  CORRECTION REPORT

Check one: Port of	
Honolulu	1
Kalaheoa Barbers Point	2
Hilo	3
Kawaihae	4
Kahului	5
Nawiliwili	6
Port Allen	7
Kaunakakai	8
Kaunapala	9
Hana	10
Other: Specify	11

AGENT NAME \_\_\_\_\_ Agent Code \_\_\_\_\_

VESSEL NAME \_\_\_\_\_ Voy. No. \_\_\_\_\_ CHECK ONE: Incoming  Outgoing

ARRIVAL DATE \_\_\_\_\_ Pier No. \_\_\_\_\_ DOMESTIC 1

FOREIGN 2

DEPARTURE DATE \_\_\_\_\_ INTER AND 3

INTRA ISLAND

Commodity	Code	Units of Measure	Incoming				Outgoing				
			Rate	Unbonded	Bonded	Wharf Toll Amount	Rate	Unbonded	Bonded	Wharf Toll Amount	
Aqua Ammonia	62-51	bbl									
Asphalt	47-52	bbl									
Aviation Gasoline	47-53	bbl									
		bbl									
Cement	61-55	ton									
		ton									
Diesel	47-56	bbl									
		bbl									
		bbl									
Fuel Oil	47-57	bbl									
Gasoline	47-58	bbl									
		bbl									
		bbl									
		bbl									
Jet Fuel	47-59	bbl									
		bbl									
		bbl									
Kerosene	47-60	bbl									
Light Fuel	47-61	bbl									
Liquefied Petroleum Gas	47-62	bbl									
Lubricating Oil	47-63	bbl									
		bbl									
		bbl									
Miscellaneous Oil	47-64	bbl									
		bbl									
		bbl									
Molasses	63-65										
Overseas		ton									
Inter-Intra Island		ton									
Solvent	47-66	bbl									
Other Chemical Products	62-67	bbl									
(List)		bbl									
		bbl									
Other Petroleum Products	47-68	bbl									
(List)		bbl									
		bbl									
<b>CARGO TOTALS</b>											
			<b>INCOMING PIPELINE TOLL</b>				<b>OUTGOING PIPELINE TOLL</b>				
							<b>TOTAL PIPELINE TOLL CHARGES</b>				

NOTE: 1. Payment and correctly completed reports must be received not later than forty-five (45) days after date of completion of handling of cargo over State wharves.  
2. Late payment fee and interest will be charged for all incorrect or delinquent filing and payment.

ENCLOSED IS CHECK NO. \_\_\_\_\_ FOR THE AMOUNT OF \$ \_\_\_\_\_

REMARKS \_\_\_\_\_

I hereby certify that this is a true and correct account of all charges incurred by the above vessel in conformance with the Current Rules and Tariff of the Harbors Division, Department of Transportation, State of Hawaii.

PLEASE FILE ORIGINAL AND ONE COPY

\_\_\_\_\_ Date \_\_\_\_\_ Agent or Owner \_\_\_\_\_ Signature

FOR HARBOR USE ONLY  
TRANSMITTAL NO. \_\_\_\_\_ PAYMENT DATE RECEIVED \_\_\_\_\_ RECEIPT NO. \_\_\_\_\_  
DOCUMENT NO. \_\_\_\_\_ NOT RECEIVED \_\_\_\_\_ INTEREST DUE \$ \_\_\_\_\_

IF CORRECTION REPORT-ENTER TOLL REPORT DOCUMENT NO.