

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

CHECK IF: CORRECTION REPORT **

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

AGENT NAME _____ Agent Code _____

VESSEL NAME _____ Voy. No. _____ CHECK ONE: Incoming Outgoing

ARRIVAL DATE _____ Pier No. _____ DOMESTIC 1

DEPARTURE DATE _____ INTER AND 2

INTRA ISLAND 3

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									
		bbl									
CARGO TOTALS											
			INCOMING PIPELINE TOLL					OUTGOING PIPELINE TOLL			
							TOTAL PIPELINE TOLL CHARGES				

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. (As provided for in HAR §19-44-61).

2. Late payment fee and interest will be charged for all incorrect or delinquent filing and payment. (As provided for in HAR §19-44-6 & §19-44-6.1).

REMARKS _____

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

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 _____ Phone No. _____ Signature _____

TRANSMITTAL NO. _____ FOR HARBOR USE ONLY PAYMENT DATE RECEIVED _____ RECEIPT NO. _____

DOCUMENT NO. _____ NOT RECEIVED _____ INTEREST DUE \$ _____ \$ _____

IF CORRECTION REPORT-ENTER TOLL REPORT DOCUMENT NO.

All commodity codes that have unit of measure of barrel can be reported using up to 4 decimals; ton, up to 2 decimals.
** FOR CORRECTION REPORT, STRIKE THROUGH ORIGINAL DATA & RECORD THE NEW INFORMATION IN RED INK.