



APPLICATION FOR CONTINUOUS SYNOPSIS RECORD

WARNING: Please ensure that all information is up to date in order to avoid possible deficiencies or detention at PSC/FSC inspections.

All boxes must be completed. Indicate N/A if 'not applicable'.

1. Name of ship

2. IMO number

3. Official number

4. Date of registration of ship

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5. Home port of ship

6. Registered Owner name and address

7. Registered Owner IMO identification number

8. Bareboat Charterer's name and address (if any)

9. Charter Company IMO identification number (if any)

10. Name and address of company responsible for the ship's International Safety Management System

11. Address from where the company carries out safety management activities, if other than listed in (10)

12. Company IMO identification number

13. Classification societies with which the ship is classed

14. Administration/Government/Recognised Organisation which issued the Document of Compliance (DOC)

15. Body that conducted audit, if different from that issuing the DOC

16. Administration/Government/Recognised Organisation which issued the Safety Management Certificate

17. Body that conducted audit, if different from that issuing the SMC

18. Administration/Government/Recognised Organisation which issued the International Ship Security Certificate (ISSC)

19. Body that conducted audit, if different from that issuing the ISSC

Declaration

To the best of my knowledge, the information given by me on this application is true and correct in every detail.

Date

Name

Signature

Place of issue

Telephone

Facsimile

Email address