

VESSEL ENTRY APPLICATION

Please enter in the Association the under mentioned vessel, subject to the Rules, receipt of which we acknowledge:

Vessel Details	S						
Vessel Name:			Gros	ss Tonnage:		Hull Type:	
Flag:			Year	Built:		IMO / Lloyds No.	
Port of Registry:			Vess	sel Type:		Class Society:	
Call Sign:			Pass	Passenger Capacity:			·
Cover Require	ed						
Class 1 – P&I			Com	mencement Da	ate of Risk		
Class 2 – FDD :				mencement Da			
Glass I I I I							
Officers Natio		nality:		Number:		Trading Areas	
Other Crew	Nation	ality:		Number:			
International	Safety M	lanagement (ISN	I) Operating Comp	anv:			
	Certificate (SMC)			Document of Compliance (DOC)			
Date of Issue:				Date of Issue:			
Date of Expiry:				Date of Ex	piry:		
Full or Interim:				Full or Inte			
Certification Body:				Certification Body:			
Assureds							
Principal Member (name & address, registered and business)				Capacity (owner, bareboat charterer, manager etc)		Registered Company Number	
Co-Assured Members (name & address, registered and business)					owner, bareboa	at Registe	red Company
(name & addre	sss, regis	stered and busine	55)	Charleter, ii	nanager etc)	Number	
Name of Assured to be Premium Invoicee				Name of A	ssured to be	Claim Payee	
Name & Addr	ess for (Correspondence		Tel:			
. Turno & Audi	200 101 (23 USPONGONOC		Fax:			
				E-Mail:	E-Mail:		
				Website:			
Signed							
Name:				Email:			
Position:				Date:			
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