

## International Merchant Marine Registry of Belize "IMMARBE" APPLICATION FOR MINIMUM SAFE MANNING CERTIFICATE

NAME OF SHIP:	<b>GROSS TONNAGE – ITC 69 :</b>		
TYPE OF SHIP:	NATIONAL:		
<b>REGISTRATION No:</b>	CALL LETTERS:		
IMO No:	MO No: YEAR BUILT:		
MACHINERY:			
MAIN ENGINE'S POWER (kW):			
SHIP CERTIFIED FOR UMS (UNATTENDED MACHINERY SPACE OPERATIONS):			
RADIO TELEPHONE:			
GMDSS EQUIPMENT: A1 A1 + A2 A1+A2+A3 A1+A2+A3+A4			
TYPE OF VOYAGE: PLEASE TICK IN THE BOX WHERE APPROPIATE 9.TRADING AREA			
SHORT VOYAGES (AS DEFINED IN SOLAS III/3.22)			
COASTWISE TRADE (AS DEFINED IN S.I. No. 82 OF 1997)			
COASTAL TRADE (AS DEFINED IN S.I No. 82 OF 1997)			
UNRESTRICTED VOYAGES			
AREAS AS DEFINED IN THE CARIBBEAN CARGO SHIP CODE			
□ RESTRICTED AREAI □ RESTRICTED AREA II □ RESTRICTED AREA III □ UNRESTRICTED VOYAGES			
DESIGNATED OFFICE NO\NAME:			
NAME AND ADDRESS OF REGISTERED OWNERS/CHARTERERS(S):			
NAME AND ADDRESS OF OPERATING COMPANY ((copy of Safety Management Certificate, shall be submitted if applicable):			
OWNERS MANNING PROPOSAL			
DECK		ENGINE	
OFFICERS	RATINGS	ENGINEERS	RATINGS
NO. RANK STCW	NO. RANK STCW	NO. RANK STCW	NO. RANK STCW
REG	REG	REG	REG
MASTER	BOSUN	CHIEF ENG	WK ENGINEER
	<u>BOSUN</u>		RATING
CHIEF OFFICER	WK. DECK RATING	SECOND ENG	
WK OFFICER	KAIING	WK ENGINEER	
	DECK RATING	CHIEF ELECTR	
RADIO OFF	COOK .		
STATE ANY DEVIATION FROM MINIMUM STANDARDS:			
AFFIDAVIT OF APPLICANT			
I hereby affirm that all information provided by me in this application and its supporting documents and proofs			
are true and correct to the best of my knowledge and belief.			

APPLICANT'S SIGNATURE:

(Owner/Charterer/s /Manager)

13. APPLICATION DATE:\_\_\_\_\_