



Application for Inspection of Seafarers' Working and Living Conditions

To Maritime Commissioner; (Email jonathan@mngssl.org)

1. APPLICANT		Application No. _____	Application Date _____
Name		Person in charge (Stamp or signature)	
Address		Name of Department	
Tel		Fax	
E-mail		Mobile No.	

We acknowledge the provisions of National laws/requirement implementing MLC, 2006 and request you to carry out inspection(s) and to issue a certificate(s) for the Seafarers' Working and Living Conditions as detailed below.
We ensure the payment of all inspection fees and expenses incurred in the below-mentioned inspection(s) and/or issue of relevant certificate(s).

2. KIND OF SHIPBOARD INSPECTION

Interim	Initial	Inter-mediate	Renewal	Additional	Remarks
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Change of: <input type="checkbox"/> Shipowner <input type="checkbox"/> Flag <input type="checkbox"/> Recognized Organization <input type="checkbox"/> Others (_____)
Date of Inspection _____			Port of Inspection _____		
ETA/ETB _____			ETD _____		

3. PARTICULARS OF SHIP

Name of Ship	
Class & Class No.	IMO No.
Flag	Port of Registry
Gross Tonnage	*Type of Ship
Date of Keel Lay and Delivery	**Date of (expected) Registry
***DMLC Part II Letter of Review(LOR) No	***DMLC Part II Letter of Review Issued Date
Crew Nationality	

- * In case the ship was constructed in compliance with the IMO Code of Safety for Special Purpose Ships (SPS Code), "Special Purpose Ship" is to be described.
- ** The date when the ship was (will be) registered with the current flag is to be described referring to Certificate of Registry or Continuous Synopsis Record (CSR).
- *** In case the DMLC Part II of the ship has not been reviewed yet, an "Application for Review of DMLC Part II" is to be submitted.

4. INFORMATION TO MLC INSPECTOR(S)

The original DMLC (Part I and Part II) onboard the ship is identical to the one already reviewed by SingClass : <input type="checkbox"/> Yes
The master is familiar with the responsibility to implement and requirements of MLC, 2006: <input type="checkbox"/> Yes
The language to be used at the inspection: <input type="checkbox"/> English <input type="checkbox"/> Other (_____)
Person appointed by the shipowner to accompany the inspector: <input type="checkbox"/> From ashore <input type="checkbox"/> Master

5. AGENT

Name	Person in charge
Address	Mobile No
Tel	Fax
	E-mail

6. ATTACHED DOCUMENTS(S)

<input type="checkbox"/> Copy of (Provisional) Certificate of Registry
<input type="checkbox"/> Copy of the "Ship Inspection Certificate" (For If Applicable for PSC use)

7. MLC Shipowner Information

*Name of MLC Shipowner	
*Address of MLC Shipowner	

* In case the MLC Shipowner differs from the applicant, please describe the name and address of MLC Shipowner referring to Ship Inspection Certificate or Continuous Synopsis Record. Bareboat Charterer is also included the definition of MLC Shipowner.

8. BILLING CONTACT

** Please complete the following in cases where the billing contact differs from the above applicant.*

Name		Person in charge	
Address		Name of Department	
Tel		Fax	E-mail

9. MESSAGE AREA

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MLC Shipowner means the owner of the ship or another organization or person, such as the manager, agent or bareboat charterer, who has assumed the responsibility for the operation of the ship from the owner and who, on assuming such responsibility, has agreed to take over the duties and responsibilities imposed on ship owners in accordance with this Convention, regardless of whether any other organization or persons fulfill certain of the duties or responsibilities on behalf of the ship owner