



**ST. VINCENT AND THE GRENADINES
MARITIME ADMINISTRATION**

**APPLICATION FOR CHANGE OF SHIP'S MANAGER/SHIP OPERATOR
(OR EXISTING SHIP'S MANAGER/SHIP OPERATOR DETAILS)**

Name of Vessel	Official No.	IMO No
Name of Manager (company holding Document of Compliance)		Company ID (IMO No)
Address of Manager (as shown in Document of Compliance)		
Document of Compliance No.	Issuing Organization	Expiry Date

Billings relating to the vessel should be sent to :

Name and Address (Country & Zip Code)	Tel.:
	Fax:
	E-Mail:

Emergency correspondence relating to the vessel should be sent to:

Contact Person Ashore	Tel	Fax	E-mail
Alternative Contact Person Ashore			
Out of working hours Contact			

Company Security Officer (CSO)*	Tel	Fax	E-mail
Alternative CSO *			
E-mail where SSAS is directed (if different from E--mail of CSO)*			

** Applicable for ISPS Code compliant vessels*

Radio Communications.

A.A.I.C./P.S.A. which is responsible for the radio traffic accounts under the new management

A.A.I.C. for VHF, MF/HF	A.A.I.C. / P.S.A. for INMARSAT Communications
-------------------------	---

We, _____ registered owner of the Vessel, hereby confirm that the company described herein above is appointed manager of the vessel with the effect from _____

Place and Date:

Registered Owner

Print Full Name and position: