



ST. VINCENT AND THE GRENADINES MARITIME ADMINISTRATION

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Official No.	
Call Sign	
Registered	

APPLICATION
FOR CHANGE OF OWNERSHIP/NAME OF A VESSEL

PART I. GENERAL

1. Application is herewith made, pursuant to the provisions of the Shipping Act, 2004 for the Change of Ownership / Change of Name

1.1 Proposed name for registration		
1.2 Type of registration	<input type="checkbox"/> Full Term Registration / Provisional Registration <input type="checkbox"/> Bareboat Registration (two years minimum/four years maximum) <input type="checkbox"/> Scrap registration (six months maximum) <input type="checkbox"/> Pleasure or <input type="checkbox"/> Commercial (Yachts) or <input type="checkbox"/> Pleasure with limited Charter allowance	
1.3 Present name of the vessel or hull Number if new Construction		
1.4 IMO Ship Identification Number		
1.5 Type of vessel		
1.6 Classification Society with which the vessel is or will be classed and Class notation	1.6a Class	1.6b Notation (incl. trade limits if any)
1.7 Classification Society who will audit the Vessel/Manager (ISM Code)	1.7a Vessel (ISMC)	1.7b Manager (DOC)
1.8 Present/Scheduled Recognised Organisation who audited/will audit the vessel (ISPS Code)	1.8a Present	1.8b Scheduled
1.9 Date of Purchase		

2. The vessel will be registered under the following ownership:

2.1 NAME	2.3 ADDRESS	2.4 DOMICILIATION (COUNTRY)
		2.6 Tel.:
2.5 IMO Number (http://imonumbers.lrfairplay.com)		2.7 Fax:
2.9 SHARES %	2.8 E-mail:	

3. NAME OF MANAGER	3.5 Tel.:
3.1 STREET	3.6 Fax:
3.2 CITY	3.7 E-mail:
3.3 COUNTRY & ZIP CODE	3.8 DOCUMENT OF COMPLIANCE (DOC) ISSUED BY:
3.4 IMO Number (http://imonumbers.lrfairplay.com)	

4. NAME OF AGENT OR PERMANENT REPRESENTATIVE OF OWNERS IN ST. VINCENT (COMPULSORY IF THE OWNER IS NOT VINCENTIAN)	4.1 Tel.:
	4.2 Fax:
4.3 E-mail:	

PART II. CORRESPONDENCE

5. General correspondence and billings relating to the vessel should be sent to :

5.1 NAME	5.5 Tel.:	
5.2 STREET	5.6 Fax:	
	5.7 Telex:	
5.3 CITY	5.8 E-mail:	
5.4 COUNTRY & ZIP CODE		

6. Emergency correspondence relating to the vessel should be sent to :

6.1 Contact Person Ashore (DPA)	6.3 Tel.:	
6.2 Address	6.4 Email:	
	6.5 Alternative 24-hour emergency tel. number	

7. ISPS CODE :

7.1 Company Security Officer	7.2 24-hour emergency tel. number	7.3 Recognised Security Organisation (RSO)
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PART III. INSURANCE / P & I

8.1 P & I (Third Party Liability)	8.4 Tel.:	
8.2 STREET	8.5 Fax:	
	8.6 E-mail:	
8.3 CITY	8.10 Tel.:	
8.7 P & I (Crew) if different from 13.1	8.11 Fax:	
8.8 STREET	8.12 E-mail:	
8.9 CITY		

PART IV. RADIO COMMUNICATIONS

9. A contract has been (or will be) entered into with a Radio Accounting Authority (Accounting Authority Identification Code). Such Accounting Authority will ensure payment of communications. Pending the effective date of such contract the responsibility for payment of accounts and correspondence relating to the radio/telephony services of the vessel is hereby assumed by the applicant owner(s) or the Accounting Authority concerned.

9.1 A.A.I.C. for VHF, MF/HF	9.2 A.A.I.C. / P.S.A. for INMARSAT Communications
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10. Place & date	
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11. By _____
[Name and Title]
Signature

The Applicant hereby confirms that the vessel will not be engaged in any fishing activities whatsoever (including the TREATMENT, STORAGE OR TRANSPORTATION OF FISH AND FISH PRODUCTS).

<u>GENEVA OFFICE</u> 8 Avenue de Frontenex CH - 1207 GENEVA Phone: (41.22) 707.63.00 Telefax: (41.22) 707.63.50 E-Mail: geneva@svg-marad.com	The registration fees and taxes are payable to: Compagnie Monégasque de Banque 23, avenue de la Costa, MC-98000 MONACO In favour of: ST. VINCENT SHIPPING SERVICES LIMITED. IBAN MC58 1756 9000 0106 7627 0000 265 Swift: CHASUS33XXX BIC Code: CMBMMCMXXXX Clearing: 17569 Correspondent Bank: JP Morgan Chase Bank NA	<u>MONACO OFFICE</u> 74 Boulevard d'Italie E/F MC - 98000 MONACO Phone: (377) 93.10.44.50 Telefax: (377) 93.10.44.99 E-Mail: monaco@svg-marad.com
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