



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

**APPLICATION FOR RECOGNITION OF CERTIFICATES OF COMPETENCE ISSUED AS PER
THE MARITIME COASTGUARD AGENCY FOR YACHTS
& GENERAL OPERATOR CERTIFICATE / RESTRICTED OPERATOR CERTIFICATE**

GENERAL INFORMATION AND INSTRUCTIONS

Please read carefully :

1. Print legibly or typewrite all information in English. **Failure to correctly complete this application or to submit the required supporting documents may result in rejection of this application or delay in its processing.** If the documents presented are not in English Language, a certified English translation of the documents must be submitted. Priority is given to Applications received by email. Applications are valid one year.
2. Applications must be submitted to: THE COMMISSIONER FOR MARITIME AFFAIRS:

Geneva Office

8, Avenue Frontenex
CH – 1207 Geneva
Phone: +41 227076300
Telefax: +41 227076349
Email: stcw.geneva@svgmarad.com

Monaco Office

Monte Carlo Sun E/F
74, Boulevard d'Italie
MC-98000 Monaco
Phone: +377 93 10 44 50
Telefax: +377 93 10 44 99
E-mail: stcw.monaco@svg-marad.com

Piraeus Office

Vincenian house
8 Kantharou & Sachtouri Street
GR-185 37 Piraeus
Phone: +30 210 4286976
Telefax: +30 210 4185184
E-mail: cons_svg@hol.gr

3. The following documents must be submitted with this application form:

A) Passport photographs:

For STCW Endorsement and Seaman's Book: Recent scanned photo (JPG format) of the applicant, passport size (3.5 cm x 4.5 cm).

B) Identity document (copies only) :

(1) A valid passport ;

(2) A valid seamen's document issued by another Maritime Administration or a letter of commitment of employment from a shipping company for service on board a Vincentian flagged merchant vessel;

(3) A valid Licence of Competence issued in accordance with the MCA/USCG Standards for yachts for Navigational Officers together with supporting documents as per box 5.

C) Revalidations – Applications for renewal must include a copy of the new national endorsement and valid medical fitness certificate.

D) Medical requirements - Applicants, other than stated below, should have a physical examination reported on a medical form issued by a licenced physician and valid for 2 (two) years.



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4. **Fees:** Payments should be made by transfer as follows:

- Seamen's book US\$ 100.-
- STCW 1995 Endorsement for Master or Officers, US\$ 150.-
- Penalty for Forged Licences US\$ 500.- Penalty for Forged SVG Endorsements US\$ 3,000.- + one year imprisonment
- Revalidation of SVG Endorsements: US\$ 100.- : Only if it is an extension of the validity of the National document (SVG Endorsement must be issued by the same office).

Payable to:

CMB Monaco

23, Avenue de la Costa.MC-98000 MONACO

In favour of: ST. VINCENT SHIPPING SERVICES LIMITED

Account No. 0676270

IBAN No: MC58 1756 9000 0106 7627 0000 265

Swift: CMBMMCMXXXX Clearing: 17569

Correspondent Bank: JP Morgan Chase Bank NA

SWIFT CODE: CHASUS33XXX

All documentation will be forwarded to the mailing address as indicated.

5. St. Vincent and the Grenadines Maritime Administration processes your personal data in compliance with the EU General Data Protection Regulation (GDPR) and all applicable National Data Protection Laws and Regulations.

To be fully transparent and provide you with detailed information relating to the protection of your personal data, we published our [data protection policy](#).

This includes :

- Clarity on which data we have, how we use it and why we need it.
- Information about your rights and how you can exercise them.
- Details of who to contact if you have any questions or concerns.

We invite you to read our data protection policy which is available on our website:

www.svg-marad.com/data-protection-policy.asp



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

**APPLICATION FOR RECOGNITION OF YACHT CERTIFICATES OF COMPETENCE ISSUED
AS PER MARITIME COASTGUARD AGENCY (MCA) STANDARDS FOR YACHTS**

<input type="checkbox"/> New Application		<input type="checkbox"/> Duplicata		<input type="checkbox"/> Certificate of Competence issued on _____ at _____		
1. Particulars of Seafarer : Last Name / Family Name:			First Name (Given Name):		Middle Name :	
Date of Birth:		Place of Birth:		Citizenship:		
Height: _____ cm.		Colour of eyes:		Colour of hair:		
2. Contact details						
Permanent Address (Street, City & Country) :						
In case of emergency notify: Full name: _____ Relationship: _____ Address: _____						
Address where the Certificate is to be forwarded :				Delivery by: Special Courier		
				<input type="checkbox"/> Ordinary mail <input type="checkbox"/> Europe USD 130.- <input type="checkbox"/> Other Destination USD 170.-		
3. Particulars of _____ <input type="checkbox"/> Certificate of Competence & Endorsements						
Number: _____			Issuing Authority: _____			
Capacity: _____		Date of Issue: _____		Date of Expiry: _____		
Endorsement N°: _____		Date of Issue: _____		Renewed: _____ Date of Expiry: _____		
GMDSS Radio Operator: <input type="checkbox"/> General Operator <input type="checkbox"/> Restricted Operator				Issuing Authority: _____		
Number: _____			Date of Issue: _____		Date of Expiry: _____	
Endorsement N°: _____			Date of Issue: _____		Renewed: _____ Date of Expiry: _____	
<input type="checkbox"/> Master (Y) (Reg II/2) <input type="checkbox"/> YM Ocean (RYA) <input type="checkbox"/> YM Offshore (RYA) <input type="checkbox"/> Coast Skipper (RYA) <input type="checkbox"/> Ch. Mate (Y) (Reg II/2) <input type="checkbox"/> DOOW (Y) (Reg II/1) – Deck Officer of the Watch		<input type="checkbox"/> Ch. Eng (Reg III/2) <input type="checkbox"/> Ch. Eng (Reg III/3) <input type="checkbox"/> 2 nd Eng (Reg III/2) <input type="checkbox"/> 2 nd Eng (Reg III/3) <input type="checkbox"/> EOOW – Engineer. Officer of the Watch <input type="checkbox"/> MEOL – Marine Engine Operator Licence <input type="checkbox"/> AEC – Approved Engine course		GMDSS Radio Operator (IV/2) <input type="checkbox"/> General <input type="checkbox"/> Restricted		Limitations (if any): GT : _____ kW: Geographical / others : _____
4. Capacity in which the officer is required to embark on :				Vessel : _____		
<input type="checkbox"/> Master <input type="checkbox"/> Chief Engineer		<input type="checkbox"/> Chief Mate <input type="checkbox"/> Second Engineer		<input type="checkbox"/> Deck Officer <input type="checkbox"/> Engineering Officer		
5. Copy of documents that should accompany this application (see procedure):				6. Copy of endorsements (if applicable) :		
<input type="checkbox"/> Certificate of Competence <input type="checkbox"/> Passport		<input type="checkbox"/> Two Passport photographs <input type="checkbox"/> Medical Certificate issued on: _____		<input type="checkbox"/> GMDSS General Operator (IV/2) <input type="checkbox"/> GMDSS Restricted Operator (IV/2)		
7. The following declaration should be signed by the Manager / Owner and the Applicant.						
The undersigned declares that the officer described in his application and whose documents or copies are attached is proficient in spoken and written English to a standard sufficient for service in a St Vincent and the Grenadines ship. Further, that the officer can use and understand manuals, documents, equipment instructions, orders and other material in English, necessary for the function to be performed on board. Knowledge of Maritime Legislation of St. Vincent and the Grenadines for Masters and Officers serving at Management level: For designated Officers, the undersigned declares that the officer whose particulars are given in this form is competent in the matters of St. Vincent and the Grenadines Shipping Legislation and its application. (Shipping Act 2004 Part VI, Section 103) (Shipping Act 2004, Part VI, Sections 75-132)						
ALL THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND CORRECT						
Date of Application: _____		Name and Signature of Manager / Owner _____			Signature of Applicant _____	