



**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 Vincenian 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.



## ST. VINCENT AND THE GRENADINES MARITIME ADMINISTRATION

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:

Mirabaud & Cie Banquiers Privés, Geneva  
29, boulevard Georges-Favon, CH-1204 GENEVA  
In favour of: ST. VINCENT SHIPPING SERVICES LIMITED.  
Account No: 509 973  
IBAN No: CH41 0877 0000 0005 0997 3  
Swift: MIRA CH GG  
Correspondent Bank: Citibank N.Y

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](http://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 _____	
<b>1. Particulars of Seafarer :</b> 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:	
<b>2. Contact details</b>					
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 120.- <input type="checkbox"/> Other Destination USD 150.-	
<b>3. Particulars of _____ <input type="checkbox"/> Certificate of Competence &amp; Endorsements</b>					
Number: _____			Issuing Authority: _____		
Capacity: _____		Date of Issue: _____		Date of Expiry: _____	
Endorsement N°: _____		Date of Issue: _____		Renewed: _____ Date of Expiry: _____	
<b>GMDSS Radio Operator:</b> <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 <sup>nd</sup> Eng (Reg III/2) <input type="checkbox"/> 2 <sup>nd</sup> 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		<b>GMDSS Radio Operator (IV/2)</b>  <input type="checkbox"/> General <input type="checkbox"/> Restricted	
<b>Limitations (if any):</b>					
GT : _____		kW: _____			
Geographical / others : _____					
<b>4. Capacity in which the officer is required to embark on :</b> _____ <b>Vessel :</b> _____					
<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	
<b>5. Copy of documents that should accompany this application (see procedure):</b>				<b>6. Copy of endorsements (if applicable) :</b>	
<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)	
<b>7. The following declaration should be signed by the Manager / Owner and the Applicant.</b>					
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)					
<b>ALL THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND CORRECT</b>					
Date of Application: _____		Name and Signature of Manager / Owner _____			Signature of Applicant _____