



ST. VINCENT AND THE GRENADINES

MARITIME ADMINISTRATION

APPLICATION FORM FOR CONTINUOUS SYNOPSIS RECORD

(To be filled out by the Company or Ship's Master)

CONTINUOUS SYNOPSIS RECORD (CSR) DOCUMENT NUMBER

Dates should be in the format yyyy/mm/dd.

Information	
1	Ship's IMO Number
2	Flag State:
3	Date of registration with the State indicated in 2:
4	Name of ship:
5	Port of registration:
6	Name of current registered owner(s): Registered address(es):
7	Registered Owner Identification Number
8	If applicable, name of current registered bareboat charterer(s): Registered address(es):
9	Name of Company (International Safety Management): Registered address(es): Address(es) of its safety management activities:
10	Company Identification Number
11	Name of all classification societies with which the ship is classed:
12	Administration/Government/Recognized Organization which issued Document of Compliance: Body which carried out audit (if different):
13	Administration/Government/Recognized Organization which issued full term Safety Management Certificate Body which carried out audit and issued short term SMC:
14	Administration/Government/Recognized Security Organization which issued full term International Ship Security Certificate Body which carried out verification and issued short term ISSC:
15	Remarks

THIS IS TO CERTIFY THAT this record is correct in all respects

Issued by the Company or Master: _____

Date of issue: _____

Place of issue: _____

Name : _____

Signature : _____
