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| **Application for Registration of Vessel/Ownership Declaration/Appointment of Manager****(FORM NMA-1\_REG.2024.Rev.3)** |
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| 1. **VESSEL PARTICULARS**
 |
| Vessel New Name (for registration)      | Year Built (1)      | Keel Laid      |
| Vessel Present Name      | Vessel IMO Number (2)      | Hull Material (Steel etc)      |
| Type of Vessel      | Gross Tonnage (3)      | Net Tonnage (3)      |
| Builder’s Name      | Country Built      | Intended RO      |
| Length ITC69 (Metres) (3)      | Length Overall (Metres) (4)      | Breadth (Metres) (3)      | Depth (Metres) (3)      |
| Please select as applicable:**[ ]** Laid Up [ ]  Self-propelled [ ]  Non self-propelled**[ ]** Unmanned Machinery Spaces [ ]  Under Tow | Present (or Underlying Registry (5)      | Intended Date of Registration:       |
| Please indicate Registration type:**[ ]** Normal (No Flag / Flag Transfer) [ ]  Re-registration (Ownership Change) [ ]  Bareboat Charter In (BBC-IN) [ ]  Single Delivery Voyage (SDV) | Present Registered Owner      |
| 1. **TRADING AREA / VOYAGE INFORMATION**
 |
| Sea Area (e.g. A1+A2+A3) (6)[ ]  A1 [ ]  A1+A2 [ ]  A1+A2+A3 | Trading Area[ ]  Unlimited [ ]  Limited(\*Please specify below if Limited) |
| \*Please select and complete from the 3 options below for Limited Trading Area: |
| [ ]  For voyages within       nautical miles of the nearest coast of       (specify country) |
| [ ]  For voyages within the territorial waters of       (specify country) |
| [ ]  Others (please specify):        |
| **For Single Delivery Voyage registration only :** |
| Port of Departure      | Port of Arrival      |
| Estimated Date of Departure      | Estimated Date of Arrival       |
| Reason for Single Delivery Voyage Registration : |
| [ ]  Demolition | [ ]  Delivery | [ ]  Others (please specify) :       |
| 1. **ENGINE PARTICULARS**
 |
| Number of Engines       | Type of Engine (diesel, etc)      | Make & Model      | Total Power (KW)      |

(1) Year of Completion(2) If unavailable, please visit <https://imonumbers.ihs.com/> to request for an IMO Company number or IMO Vessel number(3) According to ITC69(4) Length of ship (LOA) – Overall length of the ship(5) Input the **“Previous”** Flag for Normal and SDV Registration and input the **“Underlying”** Flag for BBC-IN Registration(6) Select as applicable for **“Unlimited”** Trading Area and/or select all that apply for **“Limited”** Trading Area |
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| 1. **MINIMUM SAFE MANNING REQUIREMENT**

**Complete to propose manning ONLY for “Limited” Trading Area)****(Nauru Minimum Safe Manning Scale shall automatically be applied for “Unlimited” Trading Area)** |
| **DECK** | **No. of Persons** | **ENGINE** | **No. of Persons** |
| Master |       | Chief Engineer |       |
| Chief Mate  |       | Second Engineer |       |
| OOW Navigational |       | OOW Engineering |       |
| Deck Watch Rating / Able Seafarer Deck |       | Engine Watch Rating / Able Seafarer Engine |       |
| Radio Operator/GMDSS General Operator : |       |  |
| 1. **SHIP STATION LICENCE INFORMATION**
 |
| **Radio installations** | **Make** | **Model** |
| VHF Radio Installation #1 |       |       |
| VHF Radio Installation #2 |       |       |
| MF Radio Installation |       |       |
| MF/HF Radio Installation |       |       |
| Inmarsat #1 |       |       |
| Inmarsat #2 |       |       |
| Inmarsat #3 |       |       |
| Radar #1 |       |       |
| Radar #2 |       |       |
| Navtex |       |       |
| GPS |       |       |
| AIS |       |       |
| LRIT |       |       |
| SSAS |       |       |
| Portable 2-way VHF |       |       |
| Radar Transponder (SART) #1 |       |       |
| Radar Transponder (SART) #2 |       |       |
| EPIRB |       |       |
| Satellite Phone |       |       |
| Others () |       |       |
| Others () |       |       |
| Others () |       |       |
| Others () |       |       |
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| Others () |       |       |
| Others () |       |       |
| ***NOTE:*** *Please enter under* ***“Others”*** *to declare any additional terminals, beacons, or equipment.* |
| MMSI Number required: Yes [ ]  No [ ]  |
| Radio Accounting Authority (AAIC):       |
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| 1. **BAREBOAT CHARTERER PARTICULARS (only complete for “Bareboat Charter In” Registration)**
 |
| Full Name of Bareboat Charterer      | Company IMO Number (1)      |
| Domicile      |
| Name of Person In Charge      | Mobile     Telephone     Email      |
| Address of Bareboat Charterer      |
| 1. **SHIP MANAGER INFOMRATION (complete ONLY for ISM / ISPS****Code Compliant Vessel or for Voluntary Compliance)**
 |
| **Is the ISM Code applicable :** [ ] Yes [ ] No [ ]  Voluntary |
| **If ISM Code “Yes” or “Voluntary”, name of Recognized Organization (RO) for Document of Compliance :**  |
| **If ISM Code “Yes” or “Voluntary”, name of Recognized Organization (RO) for Safety Management Certificate :**  |
| **Is the ISPS Code applicable :** [ ] Yes [ ] No [ ] Voluntary |
| **If ISPS Code “Yes” or “Voluntary”, name of Recognized Security Organization (RSO) for International Ship Security Certificate :**  |
| Full name of Ship Management Company      | Company IMO Number (1)      |
| Address of Ship Management Company      |
| Telephone      | Email      |
| 1. **DECLARATION OF DESIGNATED PERSON ASHORE (DPA), DESIGNATED PERSON(DP)**

**(ONLY if ISM Code, “Yes” or “Voluntary”)** |
| Name of DPA (ISM Code) or DP (non-ISM Code):       |
| Mobile (24hr)      | Telephone      | Email      |
| Name of Alternate DPA (ISM Code) or DP (non-ISM Code):       |
| Mobile (24hr)      | Telephone      | Email      |
| 1. **DECLARATION OF COMPANY SECURITY OFFICER (CSO) (ONLY if ISPS Code, “Yes” or “Voluntary”)**
 |
| Name of CSO (ISPS Code):       |
| Mobile (24hr)      | Telephone      | Email      |
| Name of Alternate CSO (ISPS Code):       |
| Mobile (24hr)      | Telephone      | Email      |

(1) If unavailable, please visit: <https://imonumbers.ihs.com/> to request for an IMO Company number or IMO Vessel number |

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| 1. **REGISTERED OWNER INFORMATION (attach extra sheet of this page if more than one owner)**
 |
| Owner’s Details & Contact Information | Percentage of shares owned |
| Full Name of Registered owner      | Domicile      |      % |
| Company IMO Number (1)      |
| Registered Address      |
| Person In Charge      | Mobile      Telephone      Email       |
| Correspondence Address (if different from registered address)      |
| Total Percentage of 64 shares in ship |      % |
| 1. **APPLICANT’S DECLARATION**
 |
| Name of Applicant (in full)      | Applicant’s Address      |
| Applicant’s Citizenship      | Applicant’s Passport No.      |
| Designation of declarant |
| [ ]  Director of owning corporation | [ ]  Individual/joint owner(s) | [ ]  Secretary of owning corporation |
| [ ]  Authorised person (Specify:      ) |
| *I/We\**,whose name(s) *is/are\** hereunto subscribed, hereby declare, as per the requirements of the Shipping (Registration of Foreign Ships) Act 2018 of Nauru that:1. *I am* duly authorised to make this declaration;
2. The property in the ship is divided into 64 (100%) shares;
3. No person, other than those mentioned in Section 10 *is* entitled to be registered as owner of the ship;
4. A bareboat charter agreement has been legally concluded (if applicable);
5. The vessel will not be used for:
	1. Storage and transportation of illegal drugs and stolen goods;
	2. People smuggling, trafficking in person or unlawful carriage of refugees;
	3. Involvement in any war or armed conflict;
	4. Supporting civil unrest in any State or territory;
	5. Terrorism or activities in support of terrorism;
	6. Any other activity which would be contrary to the laws of Nauru or any international Convention which Nauru is a party;
6. The Registered Owner / Technical Manager / Commercial Manager / Charterer / Beneficial Owner is NOT a designated person / entity on any United Nations Security Council resolution;
7. The Nauru Maritime Administration reserves all rights to de-register the vessel with immediate effect and with no recourse or refund should the vessel be found to be contravention to any of the above listed in clause 5 and 6 above; and
8. All the particulars stated hereon and in the application form are correct and true.
 |
| Signature & Stamp of Applicant | Date and Place: |
|  |       |

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| 1. **BILLING INFORMATION ([ ]  Tick if same as Registered Owner)**

**(where all invoices relating to the registration of the vessel will be addressed to)** |
| Full name of Company      | Domicile      |
| Name of Person In Charge      | Company IMO Number (1) if available      |
| Address of Company      | Telephone     Email      |

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