



NAURU

MARITIME ADMINISTRATION

Application for Registration of Vessel/Ownership Declaration/Appointment of Manager (FORM NMA-1_REG.2018.Rev.0)

1. VESSEL PARTICULARS			
Vessel Name (for registration)	Type of Vessel	Year Built	Keel Laid
Country Built	Vessel IMO Number	Gross Tonnage	Net Tonnage
National Gross Tonnage (if any)	Deadweight	Hull Material (Steel etc)	Intended Classification Society
Length ITC69 (Metres)	Length Overall (Metres)	Breadth (Metres)	Depth (Metres)
Vessel Present Name (use Hull Number for new building)		Present Registry	
Builder's Name		Present Registered Owner:	
Please indicate Registration type: <input type="checkbox"/> Normal Registration <input type="checkbox"/> Bareboat Charter In <input type="checkbox"/> Single Delivery Voyage		Intended Date of Registration:	
2. TRADING AREA / VOYAGE INFORMATION			
Sea Area (e.g. A1+A2+A3) <input type="checkbox"/> A1 <input type="checkbox"/> A1+A2 <input type="checkbox"/> A1+A2+A3		Trading Area <input type="checkbox"/> Unlimited <input type="checkbox"/> Limited (*Please specify below if Limited)	
*Please select and complete from the 3 options below for Limited Trading Area:			
<input type="checkbox"/> For voyages within _____ nautical miles of the nearest coast of _____ (specify country)			
<input type="checkbox"/> For voyages within the territorial waters of _____ (specify country)			
<input type="checkbox"/> 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 :			
<input type="checkbox"/> Demolition	<input type="checkbox"/> Delivery	<input type="checkbox"/> Others (please specify) :	
3. ENGINE PARTICULARS			
Number of Engines	Engine Type (diesel, etc)	Make & Model	
Year Made	Total Power (KW)	Number of Shafts	Estimated Speed (Knots)

4. MINIMUM SAFE MANNING REQUIREMENT

Unmanned Machinery Spaces: Yes <input type="checkbox"/> No <input type="checkbox"/>	Bridge Control of Machinery: Yes <input type="checkbox"/> No <input type="checkbox"/>	Engine Room Watch Alarm: Yes <input type="checkbox"/> No <input type="checkbox"/>	Automatic Boilers: Yes <input type="checkbox"/> No <input type="checkbox"/>
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 :			

5. SHIP STATION LICENCE INFORMATION

Radio installations	Manufacturer	Model
VHF Radiotelephony		
VHF DSC Encoder/Decoder		
MF Radiotelephony		
MF DSC Encoder/Decoder		
MF/HF Radiotelephony		
MF/HF DSC Encoder/Decoder		
Inmarsat S E S 1		
Inmarsat S E S 2		
Inmarsat S E S 3		
Navtex Receiver		
EGC Receiver		
Satellite EPIRB		
VHF EPIRB		
Radar Transponder (SART)		
VHF Transceiver		
Two-way Radiotelephone		
Radar 1		
Radar 2		
Lifeboat VHF		
GPS		
AIS		
SSAS		
Satellite Phone		
SSB		
LRIT		
Others ()		
Others ()		
Others ()		
Others ()		
MMSI Number required: Yes <input type="checkbox"/> No <input type="checkbox"/>		
Radio Accounting Authority (AAIC):		

6. OWNER'S PARTICULARS (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	Company IMO Number	%
Registered Address		
Person In Charge	Contact Details Mobile:	
Correspondence Address (If different from registered address)	Telephone: Email:	
Total Percentage of 64 shares in ship		%
Nature of interest*: <input type="checkbox"/> Sole ownership <input type="checkbox"/> Joint ownership <input type="checkbox"/> Ownership in severalty		
7. BAREBOAT CHARTERER PARTICULARS (only complete for "Bareboat Charter In" Registration)		
Full name of Bareboat Charterer	Company IMO Number	
Name of Person In Charge	Contact Details Mobile :	
Address of Bareboat Charterers	Telephone : Fax : E-mail :	
8. SHIP MANAGEMENT COMPANY'S PARTICULARS (only for vessels that are required to comply with ISM/ISPS code)		
Name of Ship Management Company	Company IMO Number	
Name of Person in Charge	Contact details Telephone :	
Address of Ship Management Company	Fax : E-mail :	

9. APPLICANT'S DECLARATION		
Full Name of Applicant	Applicant's Address	
Citizenship	Passport No.	
<p>I, _____, hereby certify that:</p> <ol style="list-style-type: none"> 1. I am duly authorised to make this application; 2. the consent of the Authority of the current registry has been, or, before the registration, will be, obtained for the transfer of the vessel to the Nauru Maritime Administration; and 3. the information given in this section and the documents submitted herewith are, to the best of my knowledge and belief, true and correct. 		
Signature of Applicant	Date and Place:	
10. OWNER / BAREBOAT CHARTERER DECLARATION		
Full name(s) of Declarant	Address	Nationality
Designation of declarant		
<input type="checkbox"/> Director of owning corporation	<input type="checkbox"/> Individual/joint owner(s)	
<input type="checkbox"/> Secretary of owning corporation	<input type="checkbox"/> Authorised person (Specify: _____)	
<p><i>I/We*</i>, whose name(s) <i>is/are*</i> hereunto subscribed, hereby declare, as per the requirements of the Shipping (Registration of Foreign Ships) Act 2018 of Nauru that:</p> <ol style="list-style-type: none"> 1. <i>I am/we are*</i> 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 6 <i>is/are*</i> entitled to be registered as owner(s) of the ship; 4. All the particulars stated hereon and in the application form dated _____ are correct and true. 		
Name(s) and signature(s) of declarant(s):	Date and Place:	