**APPLICATION / AMENDMENT FORM**

|  |  |
| --- | --- |
| **Continuous Synopsis Record nr.** |  |

For the ship with IMO number:

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. | Name of the ship | | | | |  | | | | | |
| 2. | Call sign | | | | |  | | | | | |
| 3. | Ship type (according ISM) | | | | |  | | | | | |
| 4. | Date of registry in the Netherlands Antilles | | | | |  | | | | | |
| 5. | Previous registry in | | | | |  | | | | | |
| 6. | Date registry ceased \*) | | | | |  | | | | | |
| 7. | Port of registry | | | | |  | | | | | |
| 8. | Name of registered owner(s) | | | | |  | | | | | |
|  | Address of registered owner(s) | | | | |  | | | | | |
| 9. | Registered owner identification number | | | | |  | | | | | |
| 10. | Name(s) of registered bareboat charter | | | | |  | | | | | |
|  | Address of registered bareboat charter | | | | |  | | | | | |
| 11. | Name of the Company, as defined in Regulation IX/I of SOLAS | | | | |  | | | | | |
|  | Address of the Company, as defined in Regulation IX/I of SOLAS | | | | |  | | | | | |
| 12. | Name of Company (International Safety Management): | | | | |  | | | | | |
|  | Registered address(es)  Address(es) of its safety management activities | |  | | | | | | | | |
| 13. | Company identification number | | | | |  | | | | | |
| 14. | Classification Society / Societies of the vessel | | | Hull | |  | | ISM |  | ISPS |  |
| 15. | The Administration which has issued the Document of  Compliance (DOC) or Interim Document of Compliance to the company operating the vessel | | | | | | |  | | | |
| 16. | The Administration which has issued the Safety Management Certificate (SMC) or Interim Safety  Management Certificate | | | | | | |  | | | |
| 17. | Organization who carried out SMC / DOC audit | | | | | | |  | | | |
| 18. | Organization who issued International Ship Security Certificate (ISSC) | | | | | | |  | | | |
| 19. | Organization who carried out ISSC verification | | | | | | |  | | | |
| 20. | Name of the contact person of the Shipping Company in the Netherlands Antilles | | | | | | |  | | | |
| **21.** | **Remarks (reason for this record)** | | | | |  | | | | | |
|  |  | | | | |  | | | | | |
| Signature: | |  | | | Name: | |  | | | | |
|  | |  | | |  | |  | | | | |
| Place: | |  | | | Date: | |  | | | | |