

Application to Register a Bareboat Charter Vessel

Please read following notes before completing this form.

- Warning: the vessel is not registered until a Certificate of Bareboat Charter has been issued.
- The Register is a public Register from which any person can obtain a transcript.
- Please write using BLOCK CAPITALS and tick boxes where appropriate.
- Sections 1, 2 and 4 must be completed in all cases.
- Section 3 must be completed if this is an application for a Bareboat Charter Fishing vessel.

1: DETAILS OF THE VESSEL (to be completed in all cases)					
ls this an application to regist	er a E	Bareboat Fishing Vesse) ?		
Yes			No 🔲		
Under 100GT		100 - 499GT	Over 500GT		
Proposed Name of Vessel (Several names should be entered in order of preference)	1 2 3 4				
Port of Choice					
Home Port (port from which the vessel will operate)					
IMO Number (if known)					
Radio Call Signs (if known)					
MMSI Number (if known)					
EC Number (Fishing vessels only)					
Approximate Length (metres)					
Type of Vessel					
Year of Build					
Construction Material	Construction Material				
Name of Builder					
Address of Builder					
Place of Build					
Country of Build					

2: PRIMARY REGISTRATION DETAILS

Name of Vessel					
If the name is not in Roman script, please give a translation of it					
Port of Registration					
Registration Number	Registered Length (m)				
In which country is the vessel registered?					
Give the name and address of the Authority responsible for the vessel's registration (this application will be rejected unless this information is supplied)					
Has the vessel got an outstanding registered mortgage?	Yes	No 🗌			
Email Address					
3: COMPLETE FOR FISHING VESSELS ONLY					
Will the vessel be used to fish in European Community Waters?					
Yes No					
Has the vessel been given a de-commissioning grant or financial assistance for it to refrain from fishing in any other member State?					
Yes No					

4: DETAILS OF THE A	PPLICANT
Title (not compulsory)	
Full Name(s) / Company Name	
Address	
Postcode	
Telephone Number	
Email Address	
If you are the agent for the o	owner please tick this box
Note: All correspondence you request otherwise.	will be sent to the Charterer/Representative person unless
Signature	
Date	DD / MM / YYYY
I/we* being the owner(s) of Certificate of Registry be s	the above vessel request that all correspondence including the sent to:
Address	
My/our* registration agent/s	agent*
Signature of owner(s)	

DD/MM/YYYY

Date

5: PRIVACY NOTICE

Your Information

We collect personal information about you to carry out our official duty and to keep the UK ship register up to date and to make sure our services are planned to meet vessel owner's needs.

For more information on how we use your information please see our privacy policy available on our website https://www.gov.uk/government/organisations/maritime-and-coastguard-agency

When completed, send this form together with:

- the correct fee and;
- the Declaration of Eligibility
- In case of companies, a copy of any Certificate of Incorporation
- a copy of the Charter party agreement
- the Certificate of Registry or other document issued by the primary register.

to: Registry of Shipping and Seamen

Anchor Court, Keen Road

Cardiff

CF24 5JW Tel. No: 020 39 085203

United Kingdom Email: <u>comm.registry@mcga.gov.uk</u>