



REPÚBLICA
(REPUBLIC OF) PORTUGUESA
PORTUGAL)
REGIÃO AUTÓNOMA DA MADEIRA
(AUTONOMOUS REGION OF MADEIRA)

For RINM-MAR use
only

MAR Official NO.	
Call Sign	
MMSI	

Registo internacional de Navios da Madeira-MAR
International Shipping Register of Madeira - MAR

APPLICATION FOR REGISTRATION OF VESSEL
PERMANENT REGISTRATION TEMPORARY REGISTRATION (BAREBOAT)

PART I. GENERAL INFORMATION'S

1. PRETENDED NAME	TWO ALTERNATIVE NAMES	3. PRESENT NAME	4. IMO NUMBER
5. PRESENT PORT OF REGISTRATION	6. VESSEL TYPE	7. CLASSIFICATION SOCIETY	
		PRESENT:	NEW:
8. PROPOSED DATE AND PORT OF PURCHASE OR DELIVERY		9. PROPOSED DATE AND PORT FOR CHANGE OF FLAG	
DATE:	PORT:	DATE:	PORT:

PART II. VESSEL PARTICULARS

10. BUILT BY		11. YEAR BUILT		12. BUILD AT	
13. CONVERTED BY		14. YEAR CONVERTED		15. CONVERTED AT	
16. LENGTH OVERALL	17. LENGTH B.P. (ITC 69)	18. MAIN BREATH (ITC 69)	19. MAIN DEPTH (ITC 69)	20. HEIGHT	
21. GROSS TONS (ITC 69)	22. NET TONS (ITC 69)	23. FULL LOAD DISP.	24. LIGHT SHIP DISP	25. HULL MATERIAL	
26. NUMBER OF MASTS	27. NUMBER OF DECKS	28. HOW PROPELLED	29. NUMBERS AND TYPE OF PROP. ENGINES		
30. TOTAL RATED POWER	31. ENGINE DATE OF BUILD	32. ENGINE BUILD BY	33. ENGINE BUILD AT		
KW					
34. NUMBER AND TYPE OF AUXILIARY ENGINES		35. GENERATORS POWER	36. BOWTHRUSTER MAKER/POWER		
		KVA			

PART III. MANNING PROPOSAL

37. DECK DEPARTMENT	NUMBER	38. ENGINE DEPARTMENT	NUMBER	39. ALL OTHERS	NUMBER
MASTER		CHIEF ENGINEER		RADIO ELECTRONICS (GMDSS)	
CHIEF OFFICER		FIRST ENGINEER OFFICER		GENERAL OPERATOR (GMDSS)	
SECOND OFFICER		SECOND ENGINEER OFFICER		RADIO TELEPHONE OPERATOR	
THIRD OFFICER		THIRD ENGINEER OFFICER		HOTEL STAFF	
				OTHERS:	
ABLE SEAMEN		ENGINE RATING			
ORDINARY SEAMEN					
40. TOTAL NUMBER OF CREW INC. MASTER	41. FULLY GMDSS EQUIPPED?	42. UMS - UNATTENDED MACHINERY SPACE?	43. GEOGRAPHIC TRADING AREA		
	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>			
44. INTERCOM. SYSTEM	45. AUTOMATIC PILOT	46. MOORING WINCHES			
Maker/Model	Maker/Model	FORE:	AFT:		

PART IV. MORTGAGE YES NO

	FIRST PREFERRED MORTGAGE	SECOND PREFERRED MORTGAGE
47. MORTGAGEE (S)		
48 .TOTAL AMOUNT		
49. APPLICABLE LAW TO MORTGAGE		

PART V. CONTACTS

50. OWNER – NAME AND ADDRESS	
CONTACT PERSON	TEL
COMPANY	FAX
ADDRESS	E-MAIL
51. APPOINTED LOCAL LEGAL REPRESENTATIVE YES <input type="checkbox"/> NO <input type="checkbox"/> (APPLICABLE IN ALL CASES THAT THE DOMICILE OR HEAD OFFICE OF THE APPLICANT IS LOCATED OUTSIDE THE AUTONOMOUS REGION OF MADEIRA)	
CONTACT PERSON	TEL
COMPANY	FAX
ADDRESS	E-MAIL
52. OPERATOR/CHARTERER – NAME AND ADDRESS	
CONTACT PERSON	TEL
COMPANY	FAX
ADDRESS	E-MAIL
53. ISM MANAGER COMPANY – NAME AND ADDRESS	
DPA	TEL
COMPANY	FAX
ADDRESS	E-MAIL
54. RADIO ACCOUNTING AUTHORITY - RESPONSIBLE FOR ALL COMMUNICATION ACCOUNTS – ITU APPROVED	
NAME	AAIC NUMBER

I HEREBY DECLARES THAT THE ABOVE INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE

APPLICANT NAME IN PRINT

ON BEHALF OF:

DATE:

SIGNATURE

Please fax, mail or e-mail this form to:

International Shipping Register of Madeira –MAR

Adress: Rua do Bom Jesus n°9 – 1ºB

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