|  |  |  |
| --- | --- | --- |
| **Date:** |  | |
|  |  | |
| We,      , are the crew management company of the below described vessel and we kindly request the issuance of an authorization letter: | | |
|  | |  |
| **Vessel Name:** | |  |
|  | |  |
| **Call Sign:** | |  |
|  | |  |
| **IMO Number:** | |  |
|  | |  |
| **Registry Number:** | |  |
|  | |  |
| **Gross Tonnage:** | |  |
|  | |  |
| ***Reason*** | | ***Required Information*** |
| ***Single Voyage for Delivery*** | | * Crew List * Valid Certificate of Registry * Home country License * Minimum Safe Manning Certificate |
| ***Seafarer´s technical documentation damage or loss*** | | * Crew List * Valid Certificate of Registry * Home country License * Minimum Safe Manning Certificate |
| ***Personal Offshore technical documentation damage or loss*** | | * Crew List * Valid Certificate of Registry * Home country License * Minimum Safe Manning Certificate |
| ***Special Circumstances*** | | * Crew List * Valid Certificate of Registry * Home country License * Minimum Safe Manning Certificate |

Table No. 1

**Reason description:**

|  |
| --- |
|  |

|  |  |
| --- | --- |
|  |  |
| **Departure Port:** |  |
|  |  |
| **Estimated Time of Departure:** |  |
|  |  |

|  |  |
| --- | --- |
| **Arrival Port:** |  |
|  |  |
| **Estimated Time of Arrival**: |  |
|  |  |
| **Full Address of the Company:** |  |

***\*\*For a prompt response, please revert this application filled out and attached documents as soon as possible.***