MASTER’s Declaration for issuance of Short-Term Certification/Extension of Survey Certificate(s)

Taking into consideration the serious nature of the Coronavirus (COVID-19) and the restrictions it is placing on the movement and availability of people associated with ship surveys and inspection, this Ministry will in accordance with MSN No. 18 of 2020, permit the issuance of a short-term certificate for three months or its extension from the date of expiration of the current certificate or closure of the relevant survey window. To support the application for the issue of the certificate the following declaration is required to be completed by the Master/Skipper.

1. Name of Vessel: __________________________

2. IMO Number: __________________________

3. Date Submitted: __________________________

4. Name & Title of Person Submitting Application: __________________________

5. Contact No.: __________________________

6. Email: __________________________

7. Company’s Name (ISM) as Referred onto the Vessel’s Safety Management Certificate:

8. DECLARATION: I HEREBY CERTIFY THAT:

   The above-named vessel has been maintained in compliance with the requirements for the issue of a short-term certificate/Extension of present Certificate:

Certificate:

Date of expiration/validity:

The condition of the vessel, its structure, equipment, fittings, management and operation are satisfactory for the issue of a short-term certificate for three months or Extension from the date of expiration of the above certificate / date of closure of the appropriate survey window (delete as appropriate).

Signature: __________________________

Date: __________________________

Name: __________________________

Position: __________________________

FOR MARITIME ADMINISTRATION USE ONLY

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<th>Application number:</th>
<th>Approved ( )</th>
<th>Rejected ( )</th>
<th>Need More Information ( )</th>
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Comments by Shipping Division:

Regulation that grants the right to an extension/issue of Short Term Certificate

Is class informed? Y/N

Name & Title of Officer:

Date Reviewed:

Valid until: