



406 MHZ EPIRB REGISTRATION FORM

(PLEASE COMPLETE IN BLOCK LETTERS)
(* INDICATES COMPULSORY FIELDS)

Send to: MRCC Cape Town

Fax: +27 (0)21 938 3309

Email: mrcc.ct@samsa.org.za

EPIRB INFORMATION

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Beacon ID (Unique Identifier Number)

Cat 1 (Automatic / manual activation)

Cat 2 (Manual activation only)

How many other distress beacons are carried onboard? _____

EPIRB manufacturer _____

Model no. _____

Beacon unit serial no. _____

EPIRB REGISTRATION

New EPIRB registration

Confirmation of previous EPIRB registration details

Change of EPIRB information or ownership

Tick here if this EPIRB has been previously registered.

EPIRB previous unique ID number _____

Cancellation / Deregistration of EPIRB.

Reason for Deregistration: _____

OWNER / OPERATOR INFORMATION

Name _____

Postal address _____

City _____ Province _____

Postal code _____ Country _____

E-mail _____

Telephone (include national and local code)

(_____) _____ H W C F Other

(_____) _____ H W C F Other

(_____) _____ H W C F Other

(_____) _____ H W C F Other

EMERGENCY CONTACT INFORMATION (Please indicate someone other than the owner)

Name of **Primary** 24-hour emergency contact _____

Street address _____

Telephone (include national and local code)

(_____) _____ H W C F Other

(_____) _____ H W C F Other

(_____) _____ H W C F Other

(_____) _____ H W C F Other

Name of **Alternate** 24-hour emergency contact _____

Street address _____

Telephone (include national and local code)

(_____) _____ H W C F Other

(_____) _____ H W C F Other

(_____) _____ H W C F Other

(_____) _____ H W C F Other

VESSEL INFORMATION

Type

Sail: number of masts _____

Power: Fishing Tug Cargo Tanker Pleasure craft

Other _____

Non-power: Life boat Life raft Other _____

Vessel name _____

MMSI number _____

Call sign _____

Vessel Official number _____

Vessel Licence number _____

Vessel colour _____

Length overall _____ m People capacity _____

Vessel contact numbers

INMARSAT _____

Cellular _____

Radio equipment

VHF HF MF SSB Other _____

Number of survival craft(s) on vessel: Life boat _____ Life raft _____

Home base _____

Additional useful data _____

Signature _____

Date _____