

REPUBLIC OF SOUTH AFRICA

SOUTH AFRICAN MARITIME
SAFETY AUTHORITY

Ship Registration Act, 1998 (Act No. 58 of 1998)



REPUBLIEK VAN SUID-AFRIKA

SUID-AFRIKAANSE MARITIEME
VEILIGHEIDS OWERHEID

Wet of Skeepsregistrasie, 1998 (Wet No. 58 of 1998)

APPLICATION FOR REGISTRATION/ RENEWAL OF REGISTRATION

[mark whichever is applicable]

INCLUDING PRESCRIBED CHARACTERISTICS.

NOTE:
 This form is to be completed in full and all information supplied is to be a true reflection of the vessel's details.
 Blocks where information is requested that is not applicable to your vessel is to be completed with N/A.
 This information required may be typed in or entered neatly by hand.
 No form where the handwriting is illegible or that is incomplete will be accepted.

Identification of vessel						
Existing Name of Vessel <i>[Vessel previously registered in the Republic or elsewhere]</i>			Three Proposed Names in Order of Preference <i>[To complete if a first registration & THREE NAMES MUST BE LISTED]</i>			
IMO Number <i>[This number is not applicable to Fishing Vessels, Sailing Vessels or Pleasure Yachts]</i>						
Call Sign <i>[Issued by ICASA & a copy of the Radio Station Licence to be attached]</i>			Type of Vessel <i>[Indicate whether Fishing, Yacht, Cargo, tanker Passenger etc]</i>			
Mark with an X whichever is applicable to this vessel		Sport and Recreation Vessel		Commercial Vessel		
Home Port <i>[Mark with an X one of the following ports as a home port]</i>						
Cape Town	Saldanha	Mossel Bay	Port Elizabeth	East London	Durban	Richards Bay

To be completed where the ship has previously been registered (whether in the Republic or elsewhere).

The Registered Name of the Ship	
The Official Number of the Ship	
The Register on which the Ship was Registered	
Port of Registry of the Ship or the Home Port	

Builders Details		
Name and Address of Builder	Builder's ID of the vessel <i>[Hull ID no. allocated by builder]</i>	Principal Material of Construction of the Hull of the vessel
Place of Construction	Year of Construction	Proposed date of completion <i>[Only applicable to new buildings]</i>

Ownership and Contact Details <i>[The person's or entity's name that the vessel is to be registered in]</i>			
Full Names of Owner			
Physical address of Owner			
Postal Address of Owner	Postal Code		
Telephone No.	Fax No.	Cell phone No.	E-mail Address

Builders Dimensions

Gross Tonnage <i>[small vessel insert u/25GT]</i>		Number of Decks			
Net Tonnage		Number of Masts <i>[total number of single masts, derrick posts & twin derrick posts]</i>			
Registered Length <i>[Not applicable to u/25 GT vessels]</i>		Rigged <i>[Only to be completed if fitted with sails]</i>	Yes	Not	
Overall Length		Stem <i>[description of bow above load waterline]</i>	Straight	Curved	Other
			Raked	Clipper	
Breadth		Stern <i>[description of form of the aftermost part of the hull above the load waterline]</i>	Counter	Transom	Other
			Cruiser		
Depth		Build <i>[Is relative to the construction of the shell plating or planking.]</i>	Clincher	Carvel	Both
Method of Propulsion		Number of Watertight Bulkheads <i>[No. of complete transverse bulkheads bounding main compartments up to the tonnage deck]</i>			

Engine Particulars *[Details of Main Engines]*

Make		Manufacturer's Name & Address of Manufacturer			
Model of Engines	Serial Number				
Year Manufactured		No. of Cylinders			
No. of Engines		Bore			
No. of Shafts		Length of Stroke			
Estimated Speed	Knots	Power per engine:	_____ KW each		
Means of power transmission <i>[Including number of screws, paddles, or jets]</i>	No of Screws	Total Engine Power	_____ Total kW		
	No of Paddles				
	No of jets				

oilers [To be completed only if the vessel is steam driven]

Make and Description				
Address of Manufacturer				
Year Built	No. of Boilers	Burners/Boiler	Working Pressure	Use of Boiler

Agent's Details

[This should be the details of a person, other than persons who are on board the vessel, & who will be the central point of contact with this office in the case of an emergency]

Name of Agent				
Physical Address of Agent	Postal Code			
Postal Address of Agent	Postal Code			
Telephone Number	Cell phone number	Fax Number	E-mail Address	

I, as owner / acting on behalf of the owner declare
Name in Print
the above information to be true and correct.

.....
Signature of Owner

.....
Date