

Date / التاريخ: \_\_\_\_\_

إدارة التسجيل وشؤون البحارة  
Ship Registry and Seafarers  
Affairs Department

وزارة المواصلات  
Ministry of Transport  
دولة قطر • State of Qatar



## نموذج طلب شهادة الحد الأدنى للتطبيق للأمن Application for A Minimum Safe Manning Document (A)

### Ship Particulars

Name of Ship:	Official No.:	IMO No.:
Year of Built:	Type of Ship:	
Length Overall (LOA):	Beam:	Certified Crew Accommodation:
Gross Tonnage:	Call Sign:	
No. and Description of Engine/s:	BHP/KW:	Speed (Knots):

### Area of Navigation

Unlimited <input type="checkbox"/>	Restricted <input type="checkbox"/> , please specify:		
		<b>Yes</b>	<b>No</b>
Does vessel hold a valid Unmanned Machinery Space (UMS) Certificate?		<input type="checkbox"/>	<input type="checkbox"/>
Bridge Control		<input type="checkbox"/>	<input type="checkbox"/>
Will the Master undertake a navigational watch?		<input type="checkbox"/>	<input type="checkbox"/>

### Life Saving Appliances

Lifeboats:			
Type:	Total No.:	Total Capacity:	
Throw Overboard Liferafts:	Total No.:	Total Capacity:	
Davit Launched Life rafts:	Total No.:	Total Capacity:	

### Other Details

Type of Mooring Winches:			
External Communications:	WT:	RT:	GMDSS:
Unusual Characteristics or Special Features of Ship or Other Details, if any:			

### Application Only for Passenger Ship

No. of passengers that ship is certified to carry:	Area of Navigation:
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### Owner/Charterer/s and Manager

Name & Address of Registered Owners/Charterers:		
Telephone:	Fax:	Contact Person:

I certify that to the best of my knowledge the particulars given by me in this form are correct:

Signature of Owner/ Charterer/ Manager/ Duly Authorised Person:

التاريخ / Date:

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## Proposed Minimum Safe Manning Document (B)

### Officers:

Rank	STCW Regulation	Number
Master:		
Chief Officer:		
O.O.W (DECK):		
Chief Engineer:		
Second Engineer:		
O.O.W (Engine):		
Other:		

### Ratings:

Rank	STCW Regulation	Number
Deck Rating:		
Engine Rating:		
Electrician:		
Chief Cook:		
Steward:		
Other:		

Name & Signature of Authorized Person: