

REQUEST TO PAY BY CREDIT CARD

Registry of Shipping and Seamen

REQUEST MADE BY PHONE	REQUEST MADE IN PERSON REQUEST MADE IN APPLICATION
VESSEL/SEAFARER NAME	
VESSEL/SEAFARER NUMBER	
CARDS ACCEPTED Please tick the appropriate box below to indicate the chosen method Maestro Visa MasterCard Access Delta	
Card Number	
Start Date	
Expiry Date Maestro Issue Number	Security Code
Name of Card Holder	
Address of Card Holder	
Postcode	
Telephone Number	
Email Address	
Amount to be charged £	
Signature	Date
For Official Use Only:	
Card Input Authorisation Code:	
Signature & Date	
×	
VESSEL/SEAFARER NAME	
VESSEL/SEAFARER NUMBER	
FEE	