Date: ……………………

**To,**

**Master**

**MV. MARIA F**

Please arrange to hand over the following Original documents:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **CHQ** | **SL.NO** | **DOCCUMENT’S NAME** | **PAGES** | **REMARKS** |
|  |  | Certificate of Registry |  |  |
|  |  | Minimum Safe Manning Certificate |  |  |
|  |  | Ship Station / Mobile License |  |  |
|  |  | Emergency Position Including Rader Beacon (EPIRB) test certificate |  |  |
|  |  | Last Port State Control inspection Certificate with Form- A & B |  |  |
|  |  | Master’s Competency Certificate with Revalidation with COR, COE, Endorsement & G.MDSS |  |  |

**Other Necessary Documents (Original)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **CHQ** | **SL.NO** | **DOCCUMENT’S NAME** | **COPY** | **REMARKS** |
|  |  | Last Port Clearance |  |  |
|  |  | Crew List | 10 COPIES | **WITHOUT DATE** |
|  |  | Crew/ Officer Personal Effects List | 4 COPIES |  |
|  |  | Crew Currency Declaration List | 4 COPIES |  |
|  |  | Ships Cash Currency Declaration List | 4 COPIES |  |
|  |  | Bond Store List | 4 COPIES |  |
|  |  | Provisions Store List | 4 COPIES |  |
|  |  | Deck Store List | 4 COPIES |  |
|  |  | Engine Store List | 4 COPIES |  |
|  |  | Ships Property List | 4 COPIES |  |
|  |  | Arms & Ammunition List | 4 COPIES |  |
|  |  | Liquor/ Narcotics List | 4 COPIES |  |
|  |  | Crew Member Vaccination List | 4 COPIES |  |
|  |  | Maritime Health Declaration | 4 COPIES |  |
|  |  | Ships Particulars | 4 COPIES |  |
|  |  | Stowage Plan | 4 COPIES |  |
|  |  | Notice Of Readiness | 4 COPIES |  |
|  |  | Port Of Call List | 4 COPIES |  |
|  |  | Cargo Manifest | 4 COPIES |  |

**# FURMIGATION CERTIFICATE (ORIGINAL)**

**# LOAD PORT HOLDS CLEAN CERTIFICATE (ORIGINAL)**