

Document Number: _____

For the Ship with IMO Number: IMO _____

1. This document applies from (date)	
2. Flag State	3. Date of registration with the State indicated in 2.
4. Name of ship	5. Port of registration
6. Name of current registered owner(s) and registered address(es)	
7. Registered owner identification number	
8. Name of the current registered bareboat charterer and registered address(es)	
9. Name of company (International Safety Management) and registered address(es)	
10. Company identification number	
11. Name of all classification societies with which the ship is classed	
12. Administration/Government/Recognized Organization which issued Document of Compliance Body which carried out audit (if different)	
13. Administration/Government/Recognized Organization which issued Safety Management Certificate Body which carried out audit (if different)	
14. Administration/Government/Recognized Security Organization which issued International Ship Security Certificate Body which carried out verification (if different)	
15. Date on which the ship ceased to be registered with the State indicated in 2.	
16. Remarks (insert relevant information as appropriate)	
THIS IS TO CERTIFY THAT this record is correct in all respects	
Issued by the Company or master	Date of issue
Signature of authorized person	Name of the authorized person

Liikenne- ja viestintäministeriön vahvistama alusrekisterilomake MU6411e - 1/2019