

Ship Pre-Arrival Security Information Form

Compliance review

Exemption from the Security Provision Article 7 REGULATION (EC) No 725/2004 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 31 March 2004 on enhancing ship and port facility security.

This form has been developed in accordance with the provisions and guidance outlined in MARSEC Doc 0508.

The form must be submitted upon request, once per calendar year, to the email address sjofart@transportstyrelsen.se

Particulars of the ship and contact details

Name of ship		Call sign
Type of ship		IMO no
Gross tonnage	Inmarsat call numbers (if available)	
Port of registry	Flag State	
Port of arrival	Port facility of arrival (if known)	
Name of Company		
CSO name & 24 hour contact details		

Port and port facility information

Expected date and time of arrival of the ship in port (ETA)
Primary purpose of call

Information required by SOLAS regulation XI-2/9.2.1

Does the ship have a valid International Ship Security Certificate (ISSC)?		NO - why not?	
☐ Yes	☐ No		
Issued by (name of Administration or RSO)			Expiry date (dd/mm/yyyy)
Does the ship have an approved SSP on board?		Security Level at which the ship is currently operating?	
☐ Yes	☐ No	☐ Level 1	☐ Level 2 ☐ Level 3
Location of ship at the time this report is made			

List the last **ten** calls at port facilities in chronological order (most recent call first):

No.	Date from (dd/mm/yyyy)	Date to (dd/mm/yyyy)	Port	Country	UNLOCODE (if available)	Port facility	Security Level
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

Did the ship take any special or additional security measures, beyond those in the approved SSP?

☐ Yes

☐ No

If the answer is YES, indicate below the special or additional security measures taken by the ship.

Number as above	Special or additional security measures taken by the ship
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	

List the ship-to-ship activities, in chronological order (most recent first), which have been carried out during the period of the last **ten** calls at port facilities listed above.

Continue on separate page if necessary – insert total number of ship-to-ship activities:

Have the ship security procedures specified in the approved SSP been maintained during each of these ship-to-ship activities					
☐ Yes		☐ No		If NO, provide details of the security measures applied in lieu in the final column below.	
No.	Date from (dd/mm/yyyy)	Date to (dd/mm/yyyy)	Location or Longitude and Latitude	Ship-to-ship activity	Security measures applied in lieu
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
General description of the cargo aboard the ship					

Agent of ship at intended port of arrival

Name	
Telephone number	E-mail address

Identification of person providing the information

Date	Title or position, Master/SSO/CSO/Ship's agent	Printed name
Signature		