

Service Statement for seagoing personnel

acc to Merchant Seamen's Act (1973:282) 15 §

Fields marked with * are mandatory

Personal data of the sean	าลเ	m	16	ea	se	e	th	of	ata	d	nal	or	rs	Эe	ı
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Name of seaman *			Civic Reg. No. (identity number) *
address of seaman			Format: yymmdd-xxxx
adioco di coaman			
Nata ali aut tha aat			
Data about the act			
Call sign *	Name of vessel *		
_			
Date of signing on *	Position on board	*	Trade area * Not 1)
ormat: yyyy-mm-dd			
Date of signing off	Number of service	-	
	The	e number o	f days are manadtory on signing off
Format: yyyy-mm-dd			
Check if the seaman has	been responsile for the	he engine ((only when there is no engine crew)
Terms of service a	ccording to write	ten cont	ract of employment and to valid
collective agreeme	•		
No. 1			
Shipowner			
lame of shipowner *			Name of master or representative *
address of shipowner *			
Phone *	E-n	nail	
Signature of soom	on and represent	tativa of	ahinaumar
Signature of seam	an and represent	tative or	snipowner
Signature of s	eaman	•	Signature of the representative of the shipowner Not 2)
· ·			ppy of the undersigned form
			.,
Swedish Transpor		one 146	771 41 33 00
Maritime Departeme	an Ph	10116 +40	111413300

BS09648, version 03.00

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