

1 (3)



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.

Particulars of the shi	p 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 ki	nown)				
Name of Company		1					
CSO name & 24 hour contact detail	s						
Port and port facility	information						
Port and port facility Expected date and time of arrival or							
Primary purpose of call							
Information required	by SOLAS regulation XI-	2/9 2 1					
Does the ship have a valid Internati	onal Ship Security Certificate (ISSC)?	NO - why not?					
☐ Yes	□ No						
Issued by (name of Administration of	or RSO)			Expiry date	e (dd/mm/yyyy)		
Does the ship have an approved SS	SP on board?	Security Level at which the	ne ship is curr	ently operati	ng?		
□ Yes	□ No	☐ Level 1	☐ Leve	12	☐ Level 3		
Location of ship at the time this rep	ort is made						

Telephone +46 771 503 503 +46 11 185 256 Telefax



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)	Security Level
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

Did the	ship take a	any special or addition	onal 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						
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 th	1	procedures spe		ne approved SSP been maint				
No.	Date from (dd/mm/yyyy	Date to		Location or Longitude and Latitude	Ship-to-ship activ		Security measures applied in lieu	
1	(dd/mm/yyyy) (dd/mm/	уууу)	and Latitude				
2								
3								
4								
5								
6								
7								
8								
9								
10								
Genera	I description of	the cargo aboa	ırd the ship)	1			
Is the s		dangerous su		as cargo covered by any of C onfirm Dangerous Goods Ma			or 8 of the IMDG Code?	
Confirm	n a copy of ship	s crew list is at	tached		Confirm a copy of the ship's passenger list is attached Yes			
Othe	r security	related in	format	ion				
	any security-re							
Provide	e details:	No	If yes,	provide details:				
liovido	dotallo.							
Agent of ship at intended port of arrival								
Name								
Telephone number		E-mail address						
				providing the information Title or position, Master/SSO/CSO/Ship's agent P		Printed name		
Date	Date		Tide of [ilo or position, intester 1000/000/0111p's agent				
Signatu	Signature							
Ì								