

REGISTRY OF BRITISH SHIPS PART III (SMALL SHIP REGISTER)

APPLICATION FOR FIRST REGISTRATION OR RE-REGISTRATION

Please read the attached guidance notes and refer to them when completing this form.

PLEASE USE CAPITAL LETTERS AND TICK BOXES AS APPROPRIATE

For official use only

Date of receipt _____
 Cheque/ Receipt No. _____
 SSR Number: _____
 Date of issue _____
 Date of expiry _____

DETAILS OF SHIP

1. Name of Ship _____ **SEE NOTE 7**
 (Please note that ships bearing undesirable names will not be allowed onto the register)

2. Description (Please tick one box only)

<input type="checkbox"/> Sailing Cruiser	<input type="checkbox"/> Motor Cruiser	<input type="checkbox"/> Sailing Dinghy	
<input type="checkbox"/> Motor Sailer	<input type="checkbox"/> Inflatable	<input type="checkbox"/> Power Boat	<input type="checkbox"/> Dutch Barge SEE NOTE 9
<input type="checkbox"/> Motor Dinghy	<input type="checkbox"/> Rigid Inflatable	<input type="checkbox"/> Jet Ski	<input type="checkbox"/> Other (Please specify fully in the space below)

3. Class name or make (if known): _____

4. Overall length in metres **and centimetres** **SEE NOTE 8**
 (Please write length in words) _____ metres _____ centimetres

5. Number of Hulls **5(a) Hull Identification No.**

6. Local Registration Number (where applicable)

7. Is or has the ship ever been registered under Part I of the Register of British Ships?
 YES NO If yes, what is/ was its official number? **SEE NOTE 5**

8. Has the ship ever been registered on the Small Ship Register?
 YES NO **SEE NOTE 5**

If NO please proceed to question 11 (page 2)

9. Please State the SSR number and date of expiry of the Certificate of Registration:
 (The number should be permanently marked or affixed to the ship).

SSR _____ Date of Expiry (if known) _____

10. Are you the owner recorded on the Certificate of Registry? YES NO
 If NO, when did you acquire the ship? _____ Date _____

DETAILS OF OWNERSHIP

11. Total number of current owners:

Please enter the name and address where ordinarily resident and the nationality of every present owner (not previous). The person signing this form should appear first. It is this person to whom all correspondence in connection with Small Ships Registration will be sent. For more than two owners, please provide the details on a separate sheet for questions 12 and 13.

12. Surname _____

Forenames _____

Title Mr Mrs Miss

Other (please state) _____

Address _____

Postcode _____

Daytime Telephone No. _____

13. Nationality _____

12. Surname _____

Forenames _____

Title Mr Mrs Miss

Other (please state) _____

Address _____

Postcode _____

Daytime Telephone No. _____

13. Nationality _____

DECLARATION

(If the ship is jointly owned, the person whose details appear first in the ownership section should sign the declaration.)

I APPLY FOR REGISTRATION OF MY VESSEL (name)..... UNDER THE PROVISIONS OF THE MERCHANT SHIPPING (BAILIWICK OF GUERNSEY) LAW 2002. I UNDERSTAND THAT IT IS AN OFFENCE KNOWINGLY OR RECKLESSLY TO MAKE A FALSE STATEMENT IN ORDER TO OBTAIN REGISTRATION AND HEREBY DECLARE THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE DETAILS GIVEN IN THIS APPLICATION FORM ARE CORRECT.

Signed _____ Date _____

Full Name (CAPITAL LETTERS) _____

Statement of Length (Required only where the overall length exceeds 24 metres – see 2nd paragraph of note 8).

I CERTIFY THAT THE SHIP DESCRIBED IN THIS APPLICATION IS LESS THAN 24 METRES IN LENGTH WHEN MEASURED IN ACCORDANCE WITH THE FORMULA CONTAINED IN THE INTERNATIONAL CONVENTION TONNAGE MEASUREMENT OF SHIPS 1969 AND GIVEN EFFECT IN THE BAILIWICK OF GUERNSEY BY THE MERCHANT SHIPPING (TONNAGE) REGULATIONS 1988 (Si 1988/No 35)

Signed _____ Date _____

Full Name of surveyor (CAPITAL LETTERS) _____

Qualification of Surveyor _____

Please send this completed form, together with the **£70** registration fee and any enclosure needed to:

The Registry of British Ships
 P.O. Box 631, St Julian's Emplacement
 St Peter Port, Guernsey
 GY1 3DL

Tel: 01481 220642 / 220229

E-Mail <shipsregistry@gov.gg>

Cheques or Postal Orders should be made payable to 'States of Guernsey'. Card payments accepted.

PLEASE DO NOT SEND CASH BY POST