

## **DIVISION OF MARITIME AFFAIRS OF SAINT LUCIA**

# APPLICATION

# Seaman's Discharge Book

1. Particulars of applicant: (please use	e block letters)				
Surname	Middle name:		Given na	mes:	
Date of birth:	Place of birth		Country of birth		
dd mm yyyy			a		
Nationality:	National passport number:		Sex:		
			Male	Female	
			Wale	Temate	
Distinguishing marks:		Height (m):		Colour of eyes:	
Distinguishing marks:		Height (III):		Colour of eyes:	
Address:					
Street:					
~		~			
City:		Country:			
Contact details:		F '1			
Tel: Fax	:	Email:			
Name of next of kin:	Dalat	ionship:			
Name of next of kin:	Relat	ionsnip:			
Address of next of kin, if different from the above:					
Street:					
City:		Country:			
2. Applicant's agent/representative	contact details and/o	or billing address:			
Company:	Perso	n in charge:			
Mailing Address where the document should be sent	if different from the ab				
maning Address where the document should be sent	in different from the above:				
Street		Po	stal code:		
Succi		10	sui couc.		
City:		Country:			
Contact details:		•			

#### 3. **Specimen Signature**

Tel:

#### Note: Please ensure that the signature is affixed within the boxes provided below as this will be used for the preparation of the Endorsement. Signatures appearing out side of the box will be rejected along with the application

Fax:

1

Passport photo

Email:

## 4. Particulars of Certificate Held:

Capacity of Certificate:	
Applicable STCW regulation:	Number
Date of Issue:	Date of expiry:
Issuing country:	Last revalidation date:
Endorsements (if any):	

### 5. **Documents submitted with this Application**:

Copy of passport	Recommendation	OR Record of sea service	
Two passport-sized photographs	Medical fitness certificate	Three signatures	
STCW Basic Safety Training (A-VI/1)	<b>OR</b> Certificate of Competence	Certificate of Character/ Police Record	

## 6. Name of ship currently serving on or intending to join and capacity: (attach letter from intended employer)

Ship's name ( <i>if known</i> ):	Capacity or Rank			

# 7. Declaration by applicant:

I, the undersigned, declare that to the best of my knowledge the particulars provided by me above are the true particulars.

Applicant's signature	Date:			
8. Name of Ship Owner:				
9. Declaration by Owner	Operator/Notary Public/Inspector of Police/Justice of the Peace/Consular Officer:			
I	, the undersigned, declare that the applicant			
issued a Seaman's Discharge E	, known to me personally and I recommend that he/she may be ook enabling him/her to serve on board a Saint Lucia vessels.			
Signature of Declarant	 Date			
NOTE:	Date			
Please ensure the statutory fee of EC\$100.00 for issuing the endorsement accompanies the application.				
FOR OFFICIAL USE ONLY:				
Received	No.			
Initial review:	Approved: Yes No			
Date of issue:	Date Approved:			
	Approved by:			
	Signature:			