



Ministry of Transport and Civil Aviation
Government of the Republic of Maldives

APPLICATION FOR MINIMUM SAFE MANNING DOCUMENT

Name and Address of Applicant: _____ _____	
Contact Person: _____	Contact Number: _____
Facsimile: _____	E-mail: _____

Name of the Vessel: _____	IMO Number: _____
Type (as per SOLAS): _____	Call Sign: _____
Gross Tonnage(International Tonnage Convention 1969) _____	
Net Tonnage (International Tonnage Convention 1969) _____	

GENERAL INFORMATION:

1. Have you ever applied for MSMD for this ship? YES NO
 IF YES, MSMD No.: _____ Previous Tonnage: _____

MACHINERY:

1. Main engine's power (HP or kW): HP: _____ kW: _____
 2. Vessel certified for UMS (unattended Machinery Space Operations)? YES NO
 3. Vessel Certified for GMDSS? YES NO

THE NATURE OF SERVICE AND TRADING AREA:

1. Distance between ports less than 500 miles? YES NO
 2. Any other special condition or requirements? _____

PRESENT MANNING:

DECK		ENGINE	
OFFICERS	CREW	OFFICERS	CREW

THIS IS TO CERTIFY that the information contained in this form is true in every particular.

Name: _____ Signature: _____

Designation: _____ Date: _____

FOR OFFICIAL USE:

DOCUMENT NUMBER	ISSUED DATE	EXPIRY DATE

Note: A Fee of MRF 500 will be charged for the issuance of a Minimum Safe Manning Document.