

PRE- ARRIVAL NOTIFICATION FORM

Particulars of the ship and contact details

| | | | |
|--------------------------------------|--|--------------------------------------|--|
| IMO number | | Name of ship | |
| Port of registry | | Flag State | |
| Type of ship | | Call Sign | |
| Gross Tonnage | | Inmarsat call numbers (if available) | |
| Name of Company | | IMO Company identification number | |
| CSO Name and 24 Hour Contact Details | | Port of arrival | |
| Port facility of arrival (if known) | | | |

Port and port facility information

| | |
|--|--|
| Expected date and time of arrival of the ship in port (ETA) (B/4.39.3 ISPS Code Estimated date and time of departure (ETD)) | |
| Primary purpose of call | |

Information required by SOLAS regulation XI-2/9.2.1

| | | | | | | |
|---|--|---------------------------------------|--|--|---|--|
| Does the ship have a valid International Ship Security Certificate (ISSC) or Interim International Ship Security Certificate (IISSC) (XI-2 / 9.2.1.1) | YES <input type="checkbox"/> | (I)ISSC Cert. Nos. | NO –why not? <input type="checkbox"/> Provide details in other security related information box | Issued by (name of Administration or RSO) | Expiry date (dd/mm/yyyy) / / | |
| Does the ship have an approved SSP on board? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Security Level at which the ship is currently operating? (XI-2/9.2.1.2) | Security Level 1 <input type="checkbox"/> | Security Level 2 <input type="checkbox"/> | Security Level 3 <input type="checkbox"/> |
| Location of ship at the time this report is made (B/4.39.2 ISPS Code) | | | | | | |

List the last ten calls at port facilities in chronological order (most recent call first): (XI-2 / 9.2.1.3)

| No | Date from (dd/mm/yyyy) | Date to (dd/mm/yyyy) | Port | Country | UNLOCODE (if available) | Port facility | Security Level |
|----|---------------------------|-------------------------|------|---------|----------------------------|---------------|----------------|
| 1 | | | | | | | SL= |
| 2 | | | | | | | SL= |
| 3 | | | | | | | SL= |
| 4 | | | | | | | SL= |
| 5 | | | | | | | SL= |
| 6 | | | | | | | SL= |
| 7 | | | | | | | SL= |
| 8 | | | | | | | SL= |
| 9 | | | | | | | SL= |
| 10 | | | | | | | SL= |

| | | |
|--|--|---------------------------------------|
| Did the ship take any special or additional security measures, beyond those in the approved SSP? If the answer is YES, indicate below the special or additional security measures taken by the ship. (XI-2 / 9.2.1.4) | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
|--|--|---------------------------------------|

| No. (as above) | Special or additional security measures taken by the ship |
|----------------|---|
| 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. Expand table below or continue on separate page if necessary – insert total number of ship-to-ship activities:

Not Applicable

Have the ship security procedures specified in the approved SSP been maintained during each of these ship-to-ship activities? (XI-2 / 9.2.1.5) If NO, provide details of the security measures applied in lieu in the final column below.

YES

NO

Not Applicable

| No. | Date from (dd/mm/yyyy) | Date to (dd/mm/yyyy) | Location or Longitude and Latitude | Ship-to-ship activity | Security measures applied in lieu |
|-----|---------------------------|-------------------------|--|-----------------------|-----------------------------------|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |
| 8 | | | | | |
| 9 | | | | | |
| 10 | | | | | |

General description of the cargo aboard the ship (XI-2 / 9.2.1.6 & B/4.39.5 ISPS Code)

Is the ship carrying any dangerous substances as cargo covered by any of Classes 1, 2.1, 2.3, 3, 4.1, 5.1, 6.1, 6.2, 7 or 8 of the IMDG Code?

YES

NO

If YES, confirm Dangerous Goods Manifest (IMO FAL Form 7) (or relevant extract) is attached

Confirm a copy of ship's crew list is attached (IMO FAL Form 5) (XI-2 / 9.2.1.6 & B/4.39.4 ISPS Code)

YES

Confirm a copy of the ship's passenger list is attached (XI-2 / 9.2.1.6 & B/4.39.6 ISPS Code)

YES

Other security related information

Is there any security-related matter you wish to report?

YES

Provide details:

NO

Agent of ship at intended port of arrival

Name:

Contact Details:

Identification of person providing the information

Title or Position (delete as appropriate):

Name:

Signature:

Master / SSO/ CSO / Ship's agent

Date/Time/Place of completion of report