



ST. VINCENT AND THE GRENADINES
MARITIME ADMINISTRATION

APPLICATION FOR STCW ENDORSEMENT / SEAMAN'S BOOK
GENERAL INFORMATION AND INSTRUCTIONS

Please read carefully :

1. Print legibly or typewrite all information in English. **Failure to correctly complete this application or to submit the required supporting documents may result in rejection of this application or delay in its processing.** If the documents presented are not in the English Language, a certified English translation of the documents must be submitted. Priority is given to Applications received by email. Applications are valid 6 months.
2. Applications must be submitted to: THE COMMISSIONER FOR MARITIME AFFAIRS:

Piraeus Office Vincentian house 8 Kantharou & Sahtouri Street GR-185 37 Piraeus Phone: +30 210 4286976 Telefax: +30 210 4185184 E-mail: cons_svg@hol.gr	Geneva Office 8, Avenue Frontenex CH – 1207 Geneva Phone: +41 227076300 Telefax: +41 227076349 E-mail: stcw.geneva@svg-marad.com	Piraeus Office Vincentian house 8 Kantharou & Sahtouri Street GR-185 37 Piraeus Phone: +30 210 4286976 Telefax: +30 210 4185184 E-mail: cons_svg@hol.gr
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3. The following documents must be submitted with this application form:
 - A) **Two passport photographs** – A recent front view of the applicant, passport size, with the applicant's name printed on the reverse and signature on the front. Photographs should be 3.5 cm x 4.5 cm, portray a good likeness of, and identify the applicant.
 - B) **Identity document:**
 - (1) A valid passport
 - (2) A valid seamen's document issued by another Maritime Administration or a letter of commitment of employment from a shipping company for service on board a Vincentian flagged merchant vessel.
 - (3) A valid Licence of Competence with the STCW endorsement and GMDSS Certificate for Navigational Officers together with supporting documents: Basic Training & Instructions (VI/1), Proficiency Survival Craft & Rescue Boats (VI/2), Advanced Fire Fighting (VI/3) and Medical 1st Aid on board Ship (VI/4).
 - C) **Revalidations** – Applications for renewal must include a copy of the new national endorsement and valid medical fitness certificate.
 - D) **Medical requirements** - Applicants, other than stated below, should have a physical examination reported on a medical form issued by a licenced physician and valid for 2 (two) years.
4. The Seamen's Book conforms to the requirements of the International Labour Organisation's Convention No. 108 (Seafarer's Identity Documents Convention, 1958). It is issued to seafarers of Vincentian flag vessels for use when travelling to or from an assigned vessel or pursuant to instructions from the Master of such a vessel. Other uses of the book must be in conformity with Vincentian regulations. I.L.O. Convention No. 108 does not in any way restrict the right of a member nation from preventing any particular individual from entering or remaining in its territory.
5. **Fees:** Payments must be made by cheque or money order drawn on a U.S. bank and payable in US\$ to the Government of St. Vincent and the Grenadines:
 - Seamen's book US\$ 100.-
 - STCW 1995 Endorsement for Master and Chief Engineer US\$ 200.-
 - STCW 1995 Endorsements for other officers US\$ 150.-
 - Penalty for Forged Licences US\$ 500.- Penalty for Forged SVG Endorsements US\$ 3,000.- + one year imprisonment
 - Revalidation of SVG Endorsements: US\$ 100.- : Only if it is an extension of the validity of the National document (SVG Endorsement must be issued by the same office).

payable to:

CREDIT AGRICOLE (SUISSE) S.A., P.O. BOX 5260, CH- 1211 GENEVA 11 – SWITZERLAND
BENEFICIARY: HONORARY CONSULATE GENERAL OF ST. VINCENT AND THE GRENADINES (MARITIME AFFAIRS)
ACCOUNT NO: 0022688.0001.USD
IBAN NO: CH05 0874 1000 2268 8000 1
SWIFT CODE: AGRICHGG

All documentation will be forwarded to the mailing address as indicated.



**ST. VINCENT AND THE GRENADINES
MARITIME ADMINISTRATION**

APPLICATION FOR STCW ENDORSEMENT/ SEAMAN'S BOOK * (*delete as appropriate)

<input type="checkbox"/> New Application		<input type="checkbox"/> Duplicata		<input type="checkbox"/> Revalidation of Endorsement or Seaman's Book* issued on _____ at _____	
1. Particulars of Seafarer : Last Name / Family Name: _____			First Name (Given Name): _____		Middle Name : _____
Date of Birth: _____		Place of Birth: _____		Citizenship: _____	
Height: _____ cm.		Colour of eyes: _____		Colour of hair: _____	
2. Contact details					
Permanent Address (Street, City & Country) : _____					
In case of emergency notify: Full name: _____ Relationship: _____ Address: _____					
Address where the Certificate is to be forwarded :				Delivery by: Special Courier	
				<input type="checkbox"/> Ordinary mail	
<input type="checkbox"/> Europe USD 90.-					
<input type="checkbox"/> Other Destination USD 100.-					
3. Particulars of <input type="checkbox"/> Seaman's Book <input type="checkbox"/> Certificate of Competence & Endorsements					
Number: _____		Issuing Authority: _____			
Capacity: _____		Date of Issue: _____		Date of Expiry: _____	
Endorsement N°: _____		Date of Issue: _____		Renewed: _____ Date of Expir y: _____	
<input type="checkbox"/> General <input type="checkbox"/> Restricted GMDSS Certificate		Issuing Authority: _____			
Number: _____		Date of Issue: _____		Date of Expiry: _____	
Endorsement N°: _____		Date of Issue: _____		Renewed: _____ Date of Expir y: _____	
STCW Reg. Deck	Engine	GMDSS Operator IV/2		Limitations (if any): GT : _____ kW: _____	
<input type="checkbox"/> II/1	<input type="checkbox"/> III/1	<input type="checkbox"/> General		Geographical / others : _____	
<input type="checkbox"/> II/2	<input type="checkbox"/> III/2	<input type="checkbox"/> Restricted			
<input type="checkbox"/> II/3	<input type="checkbox"/> III/3				
4. Capacity in which the officer is required to embark on :				Vessel : _____	
<input type="checkbox"/> Master		<input type="checkbox"/> Chief Mate		<input type="checkbox"/> Second Engineer	
<input type="checkbox"/> Chief Engineer		<input type="checkbox"/> Officer i/c Navigational Watch		<input type="checkbox"/> Officer i/c Engineering Watch	
<input type="checkbox"/> USD 200.-		<input type="checkbox"/> GMDSS Operator		<input type="checkbox"/> USD 150.-	
5. Copy of documents that should accompany this application (see procedure):				6. Copy of endorsements (if applicable) :	
<input type="checkbox"/> Certificate of Competence		<input type="checkbox"/> Two Passport photographs		<input type="checkbox"/> GMDSS (IV/2)	
<input type="checkbox"/> STCW Endorsement		<input type="checkbox"/> Basic Safety Training & Instructions (VI/1)		<input type="checkbox"/> Oil Tanker (V/1)	
<input type="checkbox"/> Seaman's book		<input type="checkbox"/> Proficiency Survival Craft & Rescue Boats (VI/2)		<input type="checkbox"/> Chemical Tanker (V/1)	
<input type="checkbox"/> Passport		<input type="checkbox"/> Advanced Fire Fighting (VI/3)		<input type="checkbox"/> Gas Tanker (V/1)	
<input type="checkbox"/> Medical Certificate issued on: _____		<input type="checkbox"/> Medical 1 st Aid on board ship (VI/4)		<input type="checkbox"/> Ro-Ro Passenger Ships (V/2)	
				<input type="checkbox"/> Passenger Ships Other Than Ro-Ro (V/3)	
7. The following declaration should be completed and signed by the Manager / Owner.					
The undersigned declares that the officer described in this application, and whose documents or copies are attached, is proficient in spoken and written English to a standard sufficient for service on a St Vincent and the Grenadines ship and necessary for the function to be performed on board.					
Knowledge of Maritime Legislation of St. Vincent and the Grenadines for Masters and Officers serving at Management level: For designated Officers, the undersigned declares that the officer whose particulars are given in this form is competent and has knowledge of St. Vincent and the Grenadines Shipping Legislation and its application. (Shipping Act 2004 Part VI, Section 103) (Shipping Act 2004, Part VI, Sections 75-132)					
ALL THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND CORRECT					
Date of Application: _____		Name and Signature of Manager / Owner _____			Signature of Applicant _____

8. Administration use only					
Request for Confirmation of Authenticity submitted on: _____			Reminders sent on : 1 st _____ 2 nd _____ 3 rd _____		
Certificate of Competence Authenticity received on: _____			<input type="checkbox"/> Genuine		<input type="checkbox"/> Forged
GMDSS Authenticity received on: _____			<input type="checkbox"/> Genuine		<input type="checkbox"/> Forged
Payment : Endorsement (<input type="checkbox"/> \$150 <input type="checkbox"/> \$200) received on: _____			Special Courier (<input type="checkbox"/> \$80 <input type="checkbox"/> \$90) received on: _____		
Seaman's Book (<input type="checkbox"/> \$200) received on: _____					
Date : _____ The Certification & Control Officer : _____					