

Please indicate:	
New Issue	
Extension	(see section 10)

MARITIME AUTHORITY OF JAMAICA APPLICATION FOR EXEMPTION/AUTHORIZATION

1. Name of Vessel	2.Type of Vessel	3. Official Number	4. IMO Number	
5. Date of Registry	6. Year of Built	7. Vovage Type	8. Gross Tonnage	
3. Date of Registry	O. Teal of Built	7. Voyage Type	o. Gross ronnage	
9. Description of service exemptio	n/authorization requested (details of	<u>equipment involved, prop</u>	oosal, etc)	
10 Reason for service exemption/	authorization requested (circumstanc	es necessitating the exe	mption/authorization)	
10. Reason for service exemption/authorization requested (circumstances necessitating the exemption/authorization)				
11.	Corrective Action	n Plan (anticipated location	on/date for completion of repairs of servicing,	
itinerary of vessel, etc.)				
12. Is Class informed? Yes 🗌 No	<u> </u>			
12. 13 Old33 Informed: Te3 🗆 Te	13. Is Class attendance arra	anged?	Yes L No L	
If yes, date of survey 14. Comments (recommendation from Class, if applicable)				
14. Comments (recommendation	irom diass, ii applicable)			
15. I declare that to the best of		Contact Name		
provided above is true and correct and I do hereby submit all the required certificates and documents to support this application.		Telephone		
		Fax		
Signature and Title of Person		Email address		
MARITIME ADMINISTRATION				
16. Application reviewed by:		17. Payment Details		
,				
Name of Marine Surveyor/Inspector		Receipt Number:		
		Receipt Date		
Signature of Marine Surveyor/Inspector		Receipt Amount		
		Claratura		
Reviewed date		Signature: Cashier		
18. Comments by the Maritime Authority			Cashici	
- No Section State Section Control of Section Secti				
Approved			Date Approved:	
Rejected			• •	
Need more information Name & Title of Approvir		vina Officer	Dispensation valid until:	
Name a fine of Approving Officer				