Ministry of Transportation and Telecommunications

Directorate of Ship Registry and Seamen AffairsApplication for Dispensation of Manning

To: Directorate of Ship Registry & Seamen Affairs Ports & Maritime Affairs

I hereby apply for dispensation of a seafarer with details described below:

Note: Incomplete applications will not be processed

Name of Applicant:	Position:
Name of Company/Agent/Owner:	
Company/Agent/Owner.	
Company Address:	
Tel. No. :	Mobile:
Fax No.:	E-mail:
Signature of Applicant:	Date:

Particulars of Ship					
Name of Ship:	Type of Ship:				
Official Number:	Gross Tonnage:				
IMO Number:	Call Sign:				
Date of Keel was Laid:	Ship's Current Location:				
Classification Society:	Date & Time of Sailing:				
Next Port of Call: Date & Time:	,				

I. Inf	ormation	ΟĪ	seararer	to	be	aispense	a:
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- a) Name of Seafarer:
- b) Capacity:

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	c)	Date of sign off:
2.	sea	Farer who is intended to fill the vacancy temporarily: a) Name of Seafarer:
		b) Capacity:
		c) Date of sign on:
<u>No</u>	a) b)	opies of the following documents must be attached to this application form: Minimum Safe Manning Document Crew List Bahrain endorsement of the above seafarer, if any
3.	Re	ason(s) for the Dispensation:
4.		Arrangement for new replacement. Details of voyage from port of sign off to the port where the new replacement will join the ship (including Date, name of port and country)
5.	Det	ails of Seafarer

Note: Please use separate sheets for additional information if needed