



# FIJI PORTS CORPORATION LIMITED

## ISPS REQUIREMENTS FOR SHIP INTENDING TO ENTER FIJI PORTS.

### From :

NAME OF VESSEL: \_\_\_\_\_ VOY NO: \_\_\_\_\_ ROT NO: \_\_\_\_\_

TYPE OF VESSEL: \_\_\_\_\_ GROSS REGISTERED TONNAGE \_\_\_\_\_ PORT OF REGISTRY \_\_\_\_\_

VESSELS LENGTH OVERALL: \_\_\_\_\_ VESSELS ARRIVAL DRAUGHT: \_\_\_\_\_ FLAG: \_\_\_\_\_

I.S.S.CERTIFICATE No. \_\_\_\_\_ ISSUING AUTHORITY: \_\_\_\_\_ EXPIRY DATE. \_\_\_\_\_

VESSELS IMO NUMBER: \_\_\_\_\_ VESSELS CURRENT SECURITY LEVEL: \_\_\_\_\_

VESSEL OWNERS:.....VESSEL OPERATOR/CHARTER:.....

COMPANY SECURITY OFFICER: Name: \_\_\_\_\_ **email address**.....

SHIP SECURITY OFFICER: Name: \_\_\_\_\_ designation: \_\_\_\_\_

LAST 10 PORTS AND VESSEL SECURITY LEVEL AT THE PORTS	No .	PORTS / COUNTRY	DEPARTURE DATE	Security Level	No .	PORTS / COUNTRY	DEPARTURE DATE	Security Level
	1			21.01.08		6		08.01.08
2			19.01.08		7		27.12.2007	
3			16.01.08		8		16.12.2007	
4			13.01.08		9		19.11.2007	
5			10.01.08		10		09.11.2007	

*(Delete Non-applicable)*

DESCRIPTION OF CARGO ONBOARD.....Refined Products

ANY PERSON/GOODS RESCUED AT SEA.../ .....

IF YES NAME/ NATIOALITY OF PERSON (S).....

TYPE OF GOODS.....

TYPE OF SECURITY CHECKS CARRIED ON;

(1) PERSONS ..... Baggage.....

(2) GOODS.....

ANY SHIP/SHIP TRANSFERIF YES - ISPS STATUS OF OTHER SHIP.....COMPLIANT/NON-COMPLIANT.

IF COMPLIANT ISSC #.....ISSUING AUTHORITY.....EXPIRY DATE.....

IF NON-COMPLINAT- SECURITY MEASURES TAKEN:.....

COPY OF CREW LIST PASSENGER LIST.....

I HEREBY DECLARE THAT THE INFORMATION SUBMITTED ABOVE IS IN MY OPINION TRUE, ACCURATE AND TO THE BEST OF MY KNOWLEDGE PROVIDED WITHOUT ANY PREJUDICE.

MASTER \_\_\_\_\_ DATE: \_\_\_\_\_ SHIP STAMP: \_\_\_\_\_

[ To be faxed to; 679-3300520 or 679-3300064 Email address [PortMaster@mpaf.com.fj](mailto:PortMaster@mpaf.com.fj) 48 hours before the vessels ETA]