



Application for Examination of a Small Commercial Vessel



The IIMS Certifying Authority
(Authorised by the Maritime & Coastguard Agency)

The Safety of Small Craft Commercial Motor and Sailing Vessels – Codes of Practice

All sections of this form must be completed before despatch to the IIMS

Vessel Unique Number: _____

(Vessel Unique Number to be obtained from office or surveyor before despatch)

(mark one below as appropriate)

New Coding Change of information Change of Ownership Change of Certifying Authority

Section 1: Vessel Details	
Vessel Name:	
Vessel Type: (mark one as appropriate) Workboat + < 1000kg <input type="checkbox"/> Workboat + > 1000kg <input type="checkbox"/> Pilot Boat <input type="checkbox"/> Tug Towing > 2 x Displacement <input type="checkbox"/> RIB <input type="checkbox"/> Motor <input type="checkbox"/> Sail <input type="checkbox"/>	
Builder:	
Location:	
Builders Make or Model:	
Hull Construction Material: (mark one as appropriate) GRP <input type="checkbox"/> Wood <input type="checkbox"/> Steel <input type="checkbox"/> Aluminium Alloy <input type="checkbox"/> OTHER (describe):	
LOA: M	Beam: M
Load Line Length (if over 24m LOA): M	
Call Sign:	Year Built:
MMSI No:	
HIN:	
Official No. or SSR:	
REGISTERED: YES <input type="checkbox"/> NO <input type="checkbox"/> (mark one as appropriate) (if YES, complete Flag and Registration Details):	
Maximum number of Persons Onboard Passengers: Crew:	
Sea Area Category Requested: (mark one)	0 1 2 3 4 5 6
Port of Registry:	
Base Port:	
Nominated Departure Point for Cat 5 or Cat 6:	
Name of Nominated Marine Surveyor:	

Section 2: Owner Details
Name:
Address:
Tel No:
E-Mail:
Section 3. Managing Agent Details (if different)
Name:
Address:
Tel No:
E-Mail:
Where should certificates and correspondence be sent: Owner <input type="checkbox"/> Managing Agent <input type="checkbox"/> (mark one as appropriate)

Section 4: Declaration by Owner / Managing Agent	
I, the Owner / Managing Agent of the Vessel described above apply to have the Vessel examined and accepted under the appropriate Code of Practise for Small Commercial Vessels and agree to pay all charges in respect of the Certification of the Vessel to IIMS Certifying Authority and for the survey of the Vessel. I also declare that I have not applied to certify this vessel with any other Certifying Authority.	
If you have state the name of the Certifying Authority:	
Name of vessel if different from above:	
Signature of Owner or Managing Agent: (delete as appropriate)	
Print Name:	Date:

Send the completed form with the Application Fee to IIMS Certifying Authority at the address below.

Murrills House, 48 East Street; Portchester, HANTS PO16 9XS
ca@iims.org.uk | www.iims.org.uk | Tel: + 44 (0) 239 238 5223

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