

SHIP STATION

NEW RENEW MODIFY TEMPORARY CANCEL

Already in possession of a license:

License number:	Expiration date (d/m/y):
Country of issuance:	Class of license:

1. APPLICANT'S DETAILS

1. Customer number	
2. Company/Applicants	
3. Nature of the company	
4. Chamber of Commerce number	
5. Company's email address	
6. Website	
7. Postal address	
8. Physical address	
9. Contact Person	
Surname	
Given names	
Title/Function	
Fixed Phone	
Mobile	
Email	

2. TYPE NETWORK OR SERVICES

Class of license	
Description of service	

APPLICATION FOR

<input type="checkbox"/> Ship	<input type="checkbox"/> Coastal Ship
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3. VESSEL INFORMATION	
Name of vessel	
Vessel type	
Vessel class	
Gross tonnage	
Length (meters)	
AAIC	
MMSI	
Registration number	
Docking/Mooring/Anchorage	
Call sign	

4. EQUIPMENT INFORMATION				
	Manufacturer	Model	Serial number	Power
VHF				
H.F				
Radar				
Emg. radio				
Other equipment,				

5. Please indicate any further details

6. APPLICANTS DECLARATION	
<p><i>I understand that any permit issued to me may be subsequently modified, suspended or cancelled without advanced notice. I warrant that all information submitted herein or herewith is true, correct and complete to the best of my knowledge. I commit to payment of fees invoiced related to this application to the BTPSXM.</i></p>	
<p>Date signed (d/m/y):</p>	<p>Signature:</p>