

REGISTRATION OF SHIPS-CHECKLIST FISHING / FRP VESSELS

VesselName: _____	OfficialNo: _____
Type: _____	YearOfBuilt: _____
LOA _____	Age: _____

GT	CALLSIGN:			Gen Comments
Cover Letter	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Application of Registration Form R2 - (Prov &/or Full)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Qualified Persons	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
PNG Citizen	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Cert.of Incorporation-copy	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
IPA Cert-copy	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
IPA Report-Business Status/Financial-Registered Area of Operation	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Customs Clearance Invoice/report	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Bill of Sale-Form R6-original	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Declaration of Ownership	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Ships Particulars	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Carving Note	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Recent Photograph of vessel	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Registration Cert. from former FlagState	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Deletion Certificate (submitted only after vessel arrival in PNG)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Builders Certificate or Stat Dec or New Building Contract	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Ships Safety Certificate	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Ships Survey Report	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Minimum Manning Certificate- all vessels	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Radio Certificate	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Ships Certificates (if any)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Class Certificates (if any)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
General Arrangement Plan	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Stability Information-over 24m	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Thickness Gauging(appl. to any vessel >10m & >15ys)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Fishing Licenses (NFA)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Mortgage	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Maritime Liens	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Possesory Liens	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Statutory Liens	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	

APPLICANT:	PROFORMA INVOICE No. & AMT: _____ K		
	PAID	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	DATE OF PAYMENT: ____ / ____ /200__		

GM:			
TEL:			
FAX:			
EMAIL:			
REMARKS:			