## SHIP PRE-ARRIVAL SECURITY INFORMATION FORM

FOR ALL SHIPS PRIOR TO ENTRY INTO THE PORT OF AN EU MEMBER STATE (SOLAS REGULATION XI-2/9 AND ARTICLE 6.1 OF REGULATION (EC) No. 725/2004)

## TO BE SUBMITTED TO THE COMPETENT AUTHORITY FOR MARITIME SECURITY OF THE PORT OF ARRIVAL

Particulars of the ship and contact details														
IMO nu	umber					Na	me of shi	p						
Port of	registry					Fla	ag State							
Type o	f ship						Call Sign							
Gross Tonnage Inmarsat call nu							mbers (if available)							
MMSI	MMSI					Name of Company								
IMO Company Number						- 1	SO name 8 our contact		3					
Port of	arrival			Port facility of arrival (if known)										
				Po	rt and p	port f	acility info	rmatio	on					
Expected date and time of arrival of the ship in port (ETA) (B/4.39.3 ISPS Code)														
Primar	y purpose of	call												
			Informa	tion re	quired	by S	OLAS reg	ulatior	XI-2/9.2.1					
Does the ship have a valid International Ship Security Certificate (ISSC)? (XI-2 / 9.2.1.1)				YES	Inte	erim C	NO - why not?		Issued by (name of Administration or RSO)			Expiry date (dd/mm/yyyy)		
Does the ship have an approved SSP on board?				NO		curre	vel at whice ontly opera			Security Level 2		Security Level 3		
Location of ship at the time this report is made (B/4.39.2 ISPS Code)														
List the	e last ten calls	s at port fac	ilities in c	hronolo	gical or	der (r	nost recen	t call fi	rst): (XI-2 / 9	.2.1.3)				
No.	No. Date from (dd/mm/yyyy) Date to (dd/mm/yyyy)			Port		Cour			OCODE ailable)	Port facility		Security Level		
1												SL=		
2												SL=		
3												SL=		
4												SL=		
5												SL =		
6												SL=		
7												SL =		
9												SL =		
10												SL=		
Did the ship take any special or additional security measures, beyond those in the approved SSP?  YES NO														
If the answer is YES, indicate below the special or additional security measures taken by the ship.  (XI-2 / 9.2.1.4)														

No.	Special or additional security measures taken by the ship
(as above)	
1	
2	
3	

4												
5												
6												
7												
8												
9												
10												
List the ship-to-ship activities, in chronological order (most recent first), which have been carried out during the period of the last ten calls at port facilities listed above. Expand table below or continue on separate page if necessary – insert total number of ship-to-ship activities:												
			y procedures spe tivities? (XI-2 / 9.2		e appro	ved S	SSP	been mai	ntained du	ring each of	YES	NO
			of the security m		oplied in	ı lieu	in th	e final co	lumn below	I.		
No.	Date fr		Date to	Location		1				Security measure	s applied	in lieu
NO.	(dd/mm/yyyy) (dd/mm/yyyy)		Longitude and Latitude			Ship-to-ship activity			and the second s			
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
General description of the cargo aboard the ship (XI-2 / 9.2.1.6 e B/4.39.5 ISPS Code)												
Is the ship carrying any dangerous substances as cargo covered by any of Classes 1, 2.1, 2.3, 3, 4.1, 5.1, 6.1, 6.2, 7 or 8 of the IMDG Code?  YES  NO  If YES, confirm Dangerous Goods Manifest (IMO FAL Form 7) (or relevant extract) is attached								st (IMO ed				
Confirm a copy of ship's crew list is attached (I.M.O. FAL Form 5) - (XI-2 / 9.2.1.6 e B/4.39.4 ISPS Code)  YES  Confirm a copy of the ship's passenger list is attached (XI-2 / 9.2.1.6 e B/4.39.6 ISPS Code)								YES				
Other security related information												
Is there any security-related matter you wish to report?  YES Provide details:  NO								NO				
				Agent of	ship at	inte!	nde	d port of	arrival			
Name:	Raffael	e Turch	ni & C. Sas Raver	nna C	ontact d	etails	(Tel	l. no.): 05	44 212417			
			Iden	tification	of pers	on p	rovi	ding the	informatio	n		
Identification of person providing the information												

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Title or Position (delete as appropriate):	Name:	Signature:
Master / SSO / CSO / Ship's agent (as above)		
Date/Time/Place of completion of report		