

## **Uniform Ship Pre Arrival Report**

## **As Per ISPS Code**

And Amendments of SOLAS 74
(This is to e-mailed, faxed, mailed of hand delivered to the port at least 48hrs before arrival)

Doc No: MQ-F-0301-02

Rev: 01

Date: 14.10.2019

Name of Agent: Falcon International Shipping Agency					Mob. 24 Hrs	Mob. 24 Hrs. +974309822560		
Email: mohamed@falconshipping.com					Phone Office	Phone Office: +97444313521		
Present security level on board								
Ship Name: ELHAM10			Nationality: IRA		Port of Registry: BUSHEHR			
IMO No. 9437476			Call Sign: 9BNI		ETA(Date/Time): 16/10/2019, 18:16			
Master Name: A					Company Name:			
Continuous Synopsis Record (CSR) on Board						Yes	No	
International Ship Security Certificate (ISSC)				Yes / N	Io		Full / Interim	
Date of Issue:							Date of Expiry:	
Government (RSO)							Issuing Authority	
Ship Security Office		Name		Nationality:			Designation:	
Company Security Officer		Name	Name		Designation		Designation:	
Phone No. (24 Hrs):		Numb	er	Phone Office:	Office:		Number	
Fax:		Numb	Number Email:			Email		
Responsible Person of Crew Member Appointment Name:								
Phone No. (24 Hrs):		Numb	Number Phone C		ce:		Number	
Fax:		Numb	Number Email:				Email	
Responsible Person of Ship Deployment				Name:				
Phone No. (24 Hrs):		Numb	er	Phone Office:		Number		
Fax:		Numb	er	Email:			Email	
Details of last 10 port of call (or as per separate sheet)								
Port Country (1 to 5)	Departure	See Level	Additional Security? Declaration issued? Ship to Ship Activity?	Port Country (6 to 10)ntity	Departure	Sec Level	Additional Security? Declaration issued? Ship to Ship Activity?	
DAYYER	15.10.2019			AL RUWAIS	30.09.2019			
Cargo / Store / Provision / Repairs (as per separate sheet)								

Details of cargo to be discharged (cargo per type, container, general, cars, bulk, others) port loading, stowage location. Details of dangerous goods in transit (UN No., Weight, Stowage)/Details of dangerous goods for discharging (UN No., Weight, Stowage) Details of Ships store / Details of ships provisions / Details of ship repairs incl. workship details.

Passenger: Family Name: Given Name: Nationality:

Crew Rate of Ranking Family Name: Nationalities: Date of Birth Place of Birth

Signature

IMS FORM - Copy available in MWANI INTRANET

Date: