MARITIME SAFETY AUTHORITY OF FIJI APPLICATION FOR SURVEY (Maritime Transport Act, 2013)

PARTICULARS OF SHIP

Name:	FOR OFFICIAL
Type of survey: Safety Equipment only. Initial, Sight, Annual, 4 year, Compass Adjustment, Special &	USE ONLY
Others	
Length:Gross Tons:	
Kilowatts:	
Passengers: Intended number – 40 =	\$
Locality of ship:	ľ
Date & Time for Survey:	\$*
Date & Time ship entering Slipway:	ľ
Basic fee paid:*	
Additional visit: No.:*	\$*
Victualling:*	
	\$*
TOTAL	
	¢ *
R/R No.	\$*
Notes:	
I. At least 24 hours written notice is required for attendance of a Surve	yor.
2. Ship shall not be unslipped without Hull Surveyors authority.	•
3. Additional charges may be incurred due to overtime working or de	
control of the Surveyors. Such costs must be paid by the ship owners	
Certificate will be issued. To prevent this causing undue delay to a ship	
request an "Interim Survey Certificate" of 2 weeks duration to be issue	ed as soon as the
Surveyor Declaration is signed.	
4. For initial Survey only state:	
4.1 Type and purpose of ship:	
4.2 Intended area of operation:	
4.3 If ship to be in class, the Society:4.4 Attach any Certificates of Tonnage, Class Loadline, and Ship	o'c plane
I hereby apply for a Survey to be conducted.	s pialis.
Thereby appry for a survey to be conducted.	
Date:	
	Owner/Agent