

## Application for a Change of Name and/or Port of Choice

**Warning**: You must not alter the details marked on the vessel until you have received a carving and marking note showing the approved changes.

Please write in **BLOCK CAPITALS** and tick boxes where appropriate.

1. CURRENT DETAILS OF THE VESSEL (to be completed in all cases)		
Current Name of Vessel		
IMO Number		
2. CHANGE OF NAME		

2. CHANGE OF NAM	E
Please enter several na further names	mes in order of preference. If none are available, you will be asked to submit
1	
2	
3	
3. CHANGE OF PORT	OF CHOICE
Intended Port of Choice	re

NB: In respect of Fishing vessels, the present name of your vessel may not be acceptable at the intended port of choice. If you wish you may list alternative names in Section 2.

## 4. DETAILS OF THE APPLICANT

Preferred Port Letters & Numbers (PLNs - Fishing)

Title	
Full Name(s)/Company Name	
Address	
Postcode	

Telephone Number		
Email Address		
Please note that all correspondence will be sotherwise	sent to the owner/managing owner	r unless request
If you require the vessel documents to be sent t	to the Agents, then please tick this bo	эх 🗌
Applicant Signature		
Date		
5. DETAILS OF THE APPLICANT All owners must sign below.		
Signature(s) of Owner(s)	Full Name(s) of Owners	Date
6. CONTACT DETAILS When completed, please send this form togeth Mrs. Karen Yon, Registrar of Shipping, Corporate Finance, S Helena Island. STHL 1ZZ Tel: (00) 290 22008 E-mail: karen.yon@sa Mr. Alan Bennett, Deputy Registrar of Shipping, Corporate Finance St Helena Island. STHL 1ZZ Tel: (00) 290 22008 E-mail: alan.bennett@	St Helena Government, Post Office ainthelena.gov.sh nce, St Helena Government, Post Of	, Jamestown. St