

Form 7

APPOINTMENT OF LOCAL REPRESENTATIVE PERSON

Vessel Name: _____

Official Number: _____

I hereby confirm the appointment of representative person for the above described ship as follows:

Name of Individual or Body Corporate
to act as Representative Person: _____

Address:
(P.O.Box and street address) _____

Telephone: _____

Fax: _____

E-mail: _____

Signature: _____

Name: _____

Capacity: _____

Date: _____

**N.B.*

- *The Registrar must be kept informed of all changes of the Local Representative Person including changes in name, address and new appointments.*
- *This form may be substituted by a letter under individual or company letterhead, provided it contains the same information.*