**Ship name Official number IMO ship number**

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**Issued by Issued to**

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| Name of issuing organisation |  | Name of company |

WARNING: Please ensure that all information is up to date in order to avoid possible deficiencies or detention at PSC/FSC inspections.

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| **The amendments shown in the table below refer to Synopsis Record Number** |       | **for this ship.** |

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|  | **Information** | **Amendment**Indicate N/C for all items NOT being changed |
| 1 | Record entry date |       |
| 2 | Flag State |       |
| 3 | Date of registration of ship |       |
| 4 | Name of ship |       |
| 5 | Home port of ship |       |
| 6 | Registered owner(s) name and address(es) |       |
| 7 | Registered owner identification number |       |
| 8 | If applicable, name of Bareboat Charterer(s), address(es) and identification number |       |
| 9 | Name and address of company responsible for the ship’s International Safety Management SystemAddress from where the company carries out safety management activities, if different to above |       |
| 10 | Company identification number |       |
| 11 | Classification societies with which the ship is classed |       |
| 12 | Administration/Government/Recognised Organisation which issued the Document of Compliance (DOC)Body that conducted audit, if different from that issuing the DOC |       |
| 13 | Administration/Government/Recognised Organisation which issued the Safety Management Certificate (SMC)Body that conducted audit, if different from that issuing the SMC |       |
| 14 | Administration/Government/Recognised Organisation which issued the International Ship Security Certificate (ISSC)Body that conducted audit, if different from that issuing the ISSC |       |
| 15 | Date on which the ship ceased to be registered with the State indicated in No. 2 above |       |
| 16 | Remarks |       |

**Declaration**

This is to certify that this record is correct in all respects.

|  |  |  |
| --- | --- | --- |
| Signature |  | Date |
|  |  | **/       /** |
|  | Place of issue |
|  |       |
| Name |  | Telephone |
|       |  |       |
| Position in company |  | Email address |
|       |  |       |

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| **Submitting your application** |  |
| 1. Before you send us your application, scan the QR code or visit <https://forms.amsa.gov.au/html/Form/shipping-registration-payment> and pay your application fee
 | **Submitting your Application**1. Once you have completed your application, scan the QR code or open the link below to

access the [AMSA payment gateway](https://forms.amsa.gov.au/html/Form/114) to pay your application fee.1. Record your payment reference number: □□□□ □□□□ □□□□
2. Email your application to: SRO@amsa.gov.au
 |
| 1. Record your payment reference number:

**Submitting your Application**1. Once you have completed your application, scan the QR code or open the link below to

access the [AMSA payment gateway](https://forms.amsa.gov.au/html/Form/114) to pay your application fee.1. Record your payment reference number: □□□□ □□□□ □□□□
2. Email your application to: SRO@amsa.gov.au

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| 1. Email your application to: sro@amsa.gov.au
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| The collection of personal information requested in this form is either required by, authorised by, or to facilitate a process under the *Navigation Act 2012* which implements SOLAS and will be handled in accordance with the *Privacy Act 1988*. Your personal information will be used for purposes related to SOLAS (including possible overseas disclosure).  Your personal information may be made available to government agencies for statistical and administrative purposes. Failure to provide the information will result in the transaction not being processed.  For more information on how to access or correct your personal information or how to make a privacy complaint, visit [www.amsa.gov.au/privacy](http://www.amsa.gov.au/privacy) |