

Government of The British Virgin Islands

MERCHANT SHIPPING ACT 2001



REQUEST FOR REPLACEMENT CERTIFICATE OF REGISTRY

To the Registrar of Shipping, Port of _		
Note: Please complete in BLOCK LE	TTERS	
Name of Ship		
Official number		
IMO number		
Number, year and port of Registry		
I, (full name)		
*owner, joint owner, authorized officer of		Authorized officer. The Registrar must hold a valid appointment in your favor.
Full Company name		appoiniment in your javor.
r r r		
*owner, joint owner (A	Bodies Corporate only)	
*Delete as necessary		
Declare that the Certificate of British R failed.	egistry of the above name	d ship has been lost and that all efforts to find it have
I request a replacement certificate and registrar of Shipping at the port of Reg		original certificate be found it will be returned to the on.
I further declare that this information is	s true to the best of my kno	owledge and belief.
Declared before me this day	of	at
Signature(Owner/Authorized C		Date
(Owner/Authorized (Officer)	
Witness Signature		
Witness Qualification		
Declarations must be made before a Re British Consular Officer, Notary Public		Justice of the Peace, a Commissioner of Oaths, A with place at which they are made.

SR 101-09 (03/10) FORMERLY ROS 9

Effective Date: 1st- January-2024

To any Certified M5-28199