



SHIP PRE-ARRIVAL INFORMATION FORM FOR ALL SHIPS PRIOR TO ENTRY INTO THE PORT

SOLAS REGULATION XI-2/9 AND ARTICLE 6.3 OF REGULATION (EC) No 725/2004

Particulars of the ship and contact details								
IMO number				Name of ship				
Port of registry				Flag state				
Type of ship				Call sign				
Gross Tonnage				Immarsat call number (if available)				
Name of Company				Company Identification number				
CSO name § 24 hour contact details								
Port and port facility information								
Port of arrival				Port facility of arrival (if known)				
Expected date and time of arrival of the ship in port (ETA)		DATE				TIME		
Primary purpose of call								
Information required by SOLAS regulation XI-2/9.2.1								
Does the ship have a valid International Ship Security Certificate (ISSC) ?		YES <input type="checkbox"/>		Issued by (Administration or RSO)		Expiry date		
		NO <input type="checkbox"/>		If not, please detail why ?				
Does the ship have an approved SSP on board ?		YES <input type="checkbox"/> NO <input type="checkbox"/>		Security level at which the ship is currently operating		Level 1 <input type="checkbox"/>	Level 2 <input type="checkbox"/>	Level 3 <input type="checkbox"/>
Location of ship at the time this report is made								
List the last ten calls at port facilities in chronological order (most recent call first)								
N°	Date from	Date to	Port	Country	UNLOCODE (if available)	Port facility	Security Level	
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								

Did the ship take any special or additional security measures, beyond those in the approved SSP? If the answer is <u>YES</u> , indicate below the special or additional security measures taken by the ship.		YES <input type="checkbox"/>	NO <input type="checkbox"/>		
N° (as above)	Special or additional security measures taken by the ship				
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
List the ship-to-ship activities , in chronological order (most recent first), which have been carried out during the period of the last ten calls at port facilities listed above.					
Where the ship security procedures specified in the approved SSP maintained during each of these ship-to-ship activities ?			YES <input type="checkbox"/>		
If <u>NO</u> , provide details of the security measures applied in lieu in the final column below			NO <input type="checkbox"/>		
N°	Date from	Date to	Location or Longitude and Latitude	Ship-to-ship activity	Security measures applied
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
General description of the cargo aboard the ship					
Is the ship carrying any dangerous substances as cargo covered by any of Classes 1, 2.1, 2.3, 3, 4.1, 5.1, 6.1, 6.2, 7, or 8 of the IMDG Code ?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If <u>YES</u> , confirm Dangerous Goods Manifest (IMO FAL Form 7) (or relevant extract) is attached	FAL 7 <input type="checkbox"/>
Confirm a copy of ship's crew list is attached (IMO FAL Form 5)		FAL 5 <input type="checkbox"/>	Confirm a copy of the ship's passenger list is attached (IMO FAL Form 6)		FAL 6 <input type="checkbox"/>

Other security related information					
Is there any security-related matter you wish to report ?		YES <input type="checkbox"/> Provide details			
		NO <input type="checkbox"/>			
Agent of ship at intended port of arrival					
Name		Contact details (tel. n°)			
Identification of person providing the information					
Title or position				Name	Signature
Master Ship's <input type="checkbox"/>	SSO <input type="checkbox"/>	CSO <input type="checkbox"/>	Agent (as above) <input type="checkbox"/>		
Date	Time	Place of completion of report			

This form must be fully filled and sent to Harbour Master Office : harbourmaster@rouen.port.fr