



MONGOLIA
MONGOLIA MARITIME ADMINISTRATION

Mongolia Ship Registry Pte Ltd
133 New Bridge Road
#16-02 Chinatown Point
Singapore 059413
Tel: (65) 6225 0125
Fax: (65) 6225 0305
Email: operations@mngssl.org
Website: www.mngssl.org

**APPLICATION FOR CERTIFICATE OF
INSURANCE OR OTHER SECURITY IN
RESPECT OF CIVIL LIABILITY FOR OIL
POLLUTION DAMAGE
(Form M6)**

In accordance with Article VII of the International Convention on Civil Liability for
Oil Pollution Damage, 1969

1. Name of Applicant (a): *(Please tick in appropriate box)*

Status: Owner Manager Authorised Applicant

2. Name and Address of Owners of Ships (if different from 3 and 4 below):

IMO Number of Owner:

Tel:

Fax:

Email:

3. Applicant's address:

Tel:

Fax:

Email:

4. Address for Reply (if different from 3)

Tel:

Fax:

Email:

5. I hereby apply for a certificate to be issued in respect of each of the ships listed overleaf
and closed remittances of US\$_____ (b)

Date: _____

Signature:

Name (c) : _____

Status in Company (c) : _____

Notes:

(a) Explanatory notes (a) to (i), see page 3

(b) Application must be accompanied by the original "BLUE CARD" for each ship

(c) Address for enquiries and for completed applications:-

Mongolia Ship Registry, 10 Anson Road #25-13, International Plaza, Singapore 079903

EXPLANATORY NOTES

- a) The applicant may be one of the following:
 - (i) the ship's owner; or
 - (ii) the ship's manager;
 - (iii) any other person specifically authorized in writing by the ship's owner.

- b) A fee of US\$180 per certificate is payable, plus US\$75 of the certificate(s) must be sent to an address outside Singapore.

- c) If the applicant is a company, the name and status in the company of the person signing this application form must be stated.

- d) For "Type of Ship" indicate whether tanker, OBO, etc.

- e) Indicate the ship's tonnage under the Convention, established in accordance with Article V 10 of the Convention.

- f) Indicate whether insurance contract, P & I cover, Bank Guarantee, Compensation Fund Certificates, etc.

- g) The period of validity of the security must be stated in terms of its exact dates of commencement and cessation and must coincide with the dates given in the insurer's or guarantor's etc certificate.

- h) Name(s) and address(es) of insurer(s) and/or guarantor(s) etc providing the security must be listed here if there are not more than two. If there are more than two, state: "See Schedule to Insurer's etc Certificate".