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| **Ship Pre-Arrival Security Information Form**  For All Ships Prior to Entry Into Ports of Abu Dhabi  (SOLAS Regulation XI-2/9 and Article TP035 of Transport Regulations (General and Port Operations)) | | | | | | | | | | | | | | | | | | | | | |
| All Ships To Submit This Form To The Port Facility Security Officer Of The Port Of Arrival at least 48 hrs Prior To Entry Into The Port Facility. | | | | | | | | | | | | | | | | | | | | | |
| **Particulars of the Ship and contact details** | | | | | | | | | | | | | | | | | | | | | |
| Name of Ship | |  | | | | | | | Type of Ship | | | | | |  | | | | | | |
| Port of Registry | |  | | | | | | | Gross Tonnage | | | | | |  | | | | | | |
| Flag State | |  | | | | | | | Call Sign | | | | | |  | | | | | | |
| IMO Number | |  | | | | | | | Inmarsat call Numbers | | | | | |  | | | | | | |
| Name of Company | |  | | | | | | | CSO Name & 24 hrs contact details | | | | | |  | | | | | | |
| Port Arrival | |  | | | | | | | Port Facility of Arrival (if known) | | | | | |  | | | | | | |
| **Abu Dhabi Port and Port Facility Information** | | | | | | | | | | | | | | | | | | | | | |
| Port Name | | | |  | | | | | | ETA | | | | | | | |  | | | |
| Primary Purpose of Call | | | |  | | | | | | | | | | | | | | | | | |
| **Information required by SOLAS Chapter XI- Regulation 9.2.** | | | | | | | | | | | | | | | | | | | | | |
| Does the ship have a valid International Ship Security Certificate (ISSC) | | | | | | | Yes € | | | | | No € | Issued By | | | | |  | | | |
| Does the ship have a valid Interim International Ship Security Certificate (IISSC) | | | | | | | Yes € | | | | | No € | Issued By | | | | |  | | | |
| Does the ship have an approved Ship Security Plan (SSP) on board | | | | | | | Yes € | | | | | No € | Issued By | | | | |  | | | |
| If No give reason | | |  | | | | | | | | | | | | | | | | | | |
| Location of Ship at the time of this report | | | | | | Lat | |  | | | | | | Long | | |  | | | | |
| **List the last 10 calls at port facilities in chronological order (most recent call first)** | | | | | | | | | | | | | | | | | | | | | |
| No. | Arrival  Date | | Departure Date | | Port | | | | | | Country | | | | | UN Locode ( if available) | | | Security Level | | |
| 1 | 2 | 3 |
| 1 |  | |  | |  | | | | | |  | | | | |  | | |  |  |  |
| 2 |  | |  | |  | | | | | |  | | | | |  | | |  |  |  |
| 3 |  | |  | |  | | | | | |  | | | | |  | | |  |  |  |
| 4 |  | |  | |  | | | | | |  | | | | |  | | |  |  |  |
| 5 |  | |  | |  | | | | | |  | | | | |  | | |  |  |  |
| 6 |  | |  | |  | | | | | |  | | | | |  | | |  |  |  |
| 7 |  | |  | |  | | | | | |  | | | | |  | | |  |  |  |
| 8 |  | |  | |  | | | | | |  | | | | |  | | |  |  |  |
| 9 |  | |  | |  | | | | | |  | | | | |  | | |  |  |  |
| 10 |  | |  | |  | | | | | |  | | | | |  | | |  |  |  |

Cntd...

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Did the ship take any special or additional security measures, beyond those in the approved SSP? If Yes, indicate below the special or additional security measures taken by the ship. | | | | | | | | | | | | | | | | | | | | | Yes | | No | | |
| € | | € | | |
| No. (as above) | | Special or additional security measures taken by the ship | | | | | | | | | | | | | | | | | | | | | | | |
| 1 | |  | | | | | | | | | | | | | | | | | | | | | | | |
| 2 | |  | | | | | | | | | | | | | | | | | | | | | | | |
| 3 | |  | | | | | | | | | | | | | | | | | | | | | | | |
| 4 | |  | | | | | | | | | | | | | | | | | | | | | | | |
| 5 | |  | | | | | | | | | | | | | | | | | | | | | | | |
| 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. Expand table below or continue on separate page if necessary. Insert total number of ship to ship activities. | | | | | | | | | | | | | | | | | | | | | | | | | |
| Have the ship security procedures specified in the approved SSP been maintained during each of these ship to ship activities? | | | | | | | | | | | | | | | | | | | | | Yes | | No | | |
| € | | € | | |
| If No, provide details of the security measures applied in lieu in the final column below. | | | | | | | | | | | | | | | | | | | | | | | | | |
| No. | | Arrival  Date | | | Departure Date | | | | Location  Lat/Long | | | | | Ship to ship activity | | | | Security measures applied on lieu | | | | | | | |
| 1 | |  | | |  | | | |  | | | | |  | | | |  | | | | | | | |
| 2 | |  | | |  | | | |  | | | | |  | | | |  | | | | | | | |
| 3 | |  | | |  | | | |  | | | | |  | | | |  | | | | | | | |
| 4 | |  | | |  | | | |  | | | | |  | | | |  | | | | | | | |
| 5 | |  | | |  | | | |  | | | | |  | | | |  | | | | | | | |
| **General description of 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 | | | No |
| € | | | € |
| If Yes, confirm Dangerous Goods Manifest (or relevant extract) is attached | | | | | | | | | | | | | | | | | | | | | | Yes | | € | |
| Confirm a copy of ships crew list is attached | | | | | | | Yes | € | Confirm a copy of ships passenger list is attached | | | | | | | | | | | | | Yes | | | € |
| **Other security related information** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Is there any security related matter you wish to report | | | | | | | | | | | | | | | | | | | | | Yes | | No | | |
| € | | € | | |
| If Yes, provide details | | |  | | | | | | | | | | | | | | | | | | | | | | |
| Agent of ship at intended port of arrival | | | | | |  | | | | | | | 24hrs contact number | | | |  | | | | | | | | |
| Identification of person providing the information | | | | | | | | | | Master € | | SSO € | | | CSO € | | | | | Ships agent € | | | | | |
| Name |  | | | | | | | | | Signature |  | | | | | | | | | | | | | | |
| Place of Completion of report | | | |  | | | | | | Time | |  | | | | Date | | |  | | | | | | |