

JR02

## APPOINTMENT OF AUTHORISED OFFICER(S) FOR A BODY CORPORATE

## **Shipping (Jersey) Law 2002**

Note: Please complete in BLOCK LETTERS

Ship's name		
Port of Registry		
Full Company name		
Full address of principal place of business		
Please give full name(s) o	f Authorised Officer(s)	
Name(s)		Signature(s)
or otherwise for and on b	ehalf of the said company, as requi	orised to make and sign all declarations of the ownership red under the provision of the Shipping (Jersey) Law 2002.  Sanges to / of the current Authorised Officer(s).
Signature of *Director/Secretary		
Full name (in BLOCK LETTERS)		
Signature of *Director/Secretary		
Full name (in BLOCK LETTERS)		
Date		
* Delete as necessary		

We will only use the information contained within this form for ships registry regulatory requirements. For more information and our full privacy notice, please follow the link: <u>Privacy notice | Ports of Jersey</u>



JE1 1HB. Tel: +44 (0) 1534 447728 Email: <a href="mailto:shipsregistry@ports.je">shipsregistry@ports.je</a> We will only use the information contained within this form for ships registry regulatory requirements. For more information and our full privacy notice, please follow the link: Privacy notice | Ports of Jersey

Please send this form to: Ships Registry, Ports of Jersey Maritime House, La Route du Port Elizabeth, St Helier, Jersey,