



REQUEST FOR CLOSURE OF REGISTRATION AT THE PORT OF JERSEY

Shipping (Jersey) Law, 2002

Name of Snip:
Official Number:
Name(s) of Registered Owner(s):
1
2
3
4
5
I/We request the closure of registration of the above ship at the Port of Jersey.
My/our reason for closure at the Port of Jersey is as follows:
Signature(s) of Owner(s) or Authorised Officer(s) requesting closure: 1
2
3
4
5
Date:
I/We enclose the Certificate of Registry for cancellation Yes No
(If the Certificate is not enclosed, it must be forwarded for cancellation at the earliest opportunity)
I/We request a Transcript of the Closed Register (cheque to be made payable to "Ports of Jersey".)
Fee enclosed for: Closure \Box Fee enclosed for: Closed transcript \Box
You should now return this completed form with the relevant documents/fee to: The Registrar of British Ships, New North Quay House, New North Quay, St Helier JE2 3ND Tel: 01534 447728

