

# Application to Register a Small Ship (S.S.R.) and re-registration

Please read the enclosed guidance notes before completing this form and refer to them when the form asks you to.  
Please use block letters.  
Please tick boxes as appropriate.

## Details of Ship

1 Name of Ship see note 6  
*Ships bearing undesirable names will not be registered.*

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2 Description

<input type="checkbox"/> Sailing Cruiser	<input type="checkbox"/> Motor Cruiser	<input type="checkbox"/> Sailing Dinghy
<input type="checkbox"/> Speedboat	<input type="checkbox"/> Rigid Inflatable	<input type="checkbox"/> Personal Watercraft
<input type="checkbox"/> Other (Please specify on the line below)		

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3 Class Name or Make

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4 Number of hulls  Hull Identification No. (H.I.N.)

5 Overall length in metres to the nearest centimetre see note 5

\_\_\_\_\_metres \_\_\_\_\_centimetres

## Part I Registry

6 Is the ship already registered under the Shipping (Jersey) Law 2002, the Merchant Shipping Act 1894, or the law of a country outside Jersey? see note 7

Yes  No  → go to question 7

6a What is its official number?

*The official number will be found permanently marked on or affixed to the ship.*

6b What is its Port and Country of Registry?

*The Port of Registry is usually painted or marked on the stern, eg London.*

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6c Are you the owner recorded on that register?

Yes  → No  ↓ If yes, have you enclosed the Certificate of Registry?  
Yes  No  → Give reasons

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If no, have you enclosed a statement of entitlement to ownership, and evidence of ownership, including bills of sale?

*The present owner(s) should draw up a statement, signed by each owner, to say that they are entitled to the entire beneficial ownership of the ship.*

Yes  No  → Give reasons

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Do you wish to request closure under the Merchant Shipping Act 1894/  
Shipping (Jersey) Law 2002?

Yes  No

## Small Ships Registry

7 Has the ship ever been registered on the Small Ships Register? see notes 3 & 4

Yes  No  → go to question 8

7a Please give its official number and date of expiry of the Certificate of Registry.

*The number will be found permanently marked on or affixed to the ship.*

SSR \_\_\_\_\_ Date of expiry (if known) \_\_\_\_\_

7b Are you the owner recorded on the Certificate of Registry?

Yes

No  →

If no, please state the date you purchased the ship

Date \_\_\_\_\_

### Ownership Details (new owners only)

8 Total number of new owners \_\_\_\_\_

Please enter the name and address of all owners

see note 2

*The person signing the form should appear first.*

9 Surname \_\_\_\_\_

Forenames \_\_\_\_\_

Mr  Mrs  Miss  Other  please state \_\_\_\_\_

Address \_\_\_\_\_

Post Code \_\_\_\_\_

10 Surname \_\_\_\_\_

Forenames \_\_\_\_\_

Mr  Mrs  Miss  Other  please state \_\_\_\_\_

Address \_\_\_\_\_

Post Code \_\_\_\_\_

11 Surname \_\_\_\_\_

Forenames \_\_\_\_\_

Mr  Mrs  Miss  Other  please state \_\_\_\_\_

Address \_\_\_\_\_

Post Code \_\_\_\_\_

12 Surname \_\_\_\_\_

Forenames \_\_\_\_\_

Mr  Mrs  Miss  Other  please state \_\_\_\_\_

Address \_\_\_\_\_

Post Code \_\_\_\_\_

13 Surname \_\_\_\_\_

Forenames \_\_\_\_\_

Mr  Mrs  Miss  Other  please state \_\_\_\_\_

Address \_\_\_\_\_

Post Code \_\_\_\_\_

## Declaration

*If the ship is jointly owned, the declaration should be signed by the person whose details appear first in the Ownership Section.*

I understand that it is an offence knowingly or recklessly to make a false statement in order to obtain registration and hereby declare that, to the best of my knowledge, the details given in this application are correct.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Name in block letters \_\_\_\_\_

Please send completed form to:

Ships' Registry,  
Economic Development,  
Jubilee Wharf,  
24 Esplanade,  
St. Helier,  
Jersey  
JE1 1BB  
Tel: 01534 448128 Fax: 01534 448158

together with the registration fee of £..... and any other enclosures needed (see question 6c).

Cheques should be made payable to the Treasurer of the States.

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### For official use only

Date of receipt                      Cheque \ Cash \ Credit Card

Date of issue                      Date of expiry

SSR \_\_\_\_\_