To the State Joint-Stock Company “Elektroniskie sakari”

Address: 5 Eksporta Street, Riga, LV-1010, Latvia; e-mail: vases@vases.lv

**Application for Ship station licence**

1. **APPLICANT (legal2** entity or **natural1** person):

Licence of ship station may be requested by the owner or operator of a ship (according to data of the Latvian Maritime Administration or RTSD) on his/her behalf.

|  |  |
| --- | --- |
| Name2 / Name, surname1 | Registration No.2 / personal identity number1 |
| Legal address2 / Declared address1 | Telephone, e-mail2,1 |

1. **Ship information**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Call sign YL |  |
|  |  |  |  |
| Previous name |  | Previous call sign |  |
|  |  |  |  |
| General classification  |  | Individual classification |  |
|  |  |  |  |
| Capacity for persons on board |  | Number of lifeboats |  |
|  |  |  |  |
| EPIRB hexadecimal (15 characters) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

1. **Ship radio transmitting equipment**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Item |  | Manufacturer |  | Type |  | Number |
| 1. |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |
| 4. |  |  |  |  |  |  |
| 5. |  |  |  |  |  |  |
| 6. |  |  |  |  |  |  |
| 7. |  |  |  |  |  |  |
| 8. |  |  |  |  |  |  |
| 9. |  |  |  |  |  |  |
| 10. |  |  |  |  |  |  |
| 11. |  |  |  |  |  |  |
| 12. |  |  |  |  |  |  |

**4. Preferred validity period of the licence** *(tick the appropriate one)*

|  |
| --- |
| 4.1 For as long as possible. |[ ]
| 4.2 By a specific date (specify the date):  |  |[ ]

**5. Comments** *(if applicable, please provide any other information you consider relevant)*

|  |
| --- |
|  |

**6. Type of receipt of licence** In accordance with the Law On Notification, please choose **one** of the methods of receipt and provide the additional information requested:

|  |
| --- |
| **In the form of an electronic document.** |
| 6.1 | By email or official e-address (if you want to receive by e-mail**, specify e-mail address):**  |[ ]
| **In printed document form** |
| 6.2 | By post to **(specify address):**  |[ ]
| 6.3 | By using both e-mail and postal servicesSend a scanned copy to **(specify e-mail address):** Send the original by post to **(specify address**):  |[ ]
| 6.4 | In person at the office of the SJSC "Elektroniskie sakari” (5 Eksporta Street, Riga) or via a messenger paid for by the client\*. **Please provide a telephone number for communication:** |[ ]

\*The licence will be sent to the client's legal address/declared address of residence, if the client/ or the client's representative fails to appear at the office of the SJSC "Elektroniskie sakari” within three business days to receive the prepared document.

I have been informed that the licence will indicate the applicant as the addressee of the licence. Invoices will be issued to the addressee of the licence.

|  |  |
| --- | --- |
|  |   |
| (place, date) |   |
|   |
| \* (title, name, surname and signature of the signatory or authorised person) |

*\*The application must be signed by the legal representative of the legal entity or his/her authorised person. If the application is signed by an authorised person, the application must be accompanied by a duly executed original of the Power of Attorney or a certified copy thereof.*

*\*The document requisite "signature" shall not be completed if the electronic document has been prepared according to the laws and regulations on the execution of electronic documents*