



MARINE DEPARTMENT
THE GOVERNMENT OF THE HONG KONG SPECIAL ADMINISTRATIVE REGION

Notice of Engagement

Authorized Surveyor / Authorized Organization / Recognized Authority
for Survey and/or Plan Approval of Local Vessels

(Merchant Shipping (Local Vessels) Ordinance, Cap 548)

PART A (to be completed by Owner / Owner's Agent)

To : Local Vessels Safety Section

Fax No.: (852) 2542 4679

Particulars of Vessel: (All available data should be entered)

Name of Vessel, Name of Owner, Certificate of Ownership number, Approval in Principle number, Class, Category, Type, Length Overall (m), Length (L) (m), Extreme Breadth (m), Hull Material.

(1) I, \_\_\_\_\_, Owner / Owner's Agent\* of the local vessel as described above, hereby engage \_\_\_\_\_, being an Authorized Surveyor (AS) / Authorized Organization (AO) / Recognized Authority (RA)\* under the Ordinance, to conduct Plan Approval / Initial Survey / Periodical Survey\* for the subject vessel for the issuance of the following certificate(s) or document:

(a) Certificate of Survey / Survey Record of Safety Equipment / Freeboard Assignment Certificate / Hong Kong Load Line Certificate\*;

(b)\* Others (please specify) \_\_\_\_\_,

and to issue appropriate declarations upon completion of the plan approval and / or survey. The survey work is expected to commence on \_\_\_\_\_ at \_\_\_\_\_ (date) (location, shipyard)

(2) To facilitate the conduct of the above requested survey, I declare that:

(a) I shall pass all relevant survey records, certificates and approved drawings (where applicable) to the above AS / AO / RA\*;

(b)\* I agree and I need MD's assistance to release the relevant survey records of the vessel to the above AS / AO / RA\*;

(c)(i)\* Alteration has not been made to the above vessel since the last survey(s) (including the replacement of diesel engine(s) or permanent ballast);

(ii)\* Alteration will be / has been\* made to the above vessel and plan(s) approval is / is not\* required;

(d) The initial / periodical\* (annual / biennial / triennial / quadrennial\*) survey will be conducted for the above vessel.

Remarks or additional information (if any):

Signature of Owner / Owner's Agent\* \_\_\_\_\_

Name (in block letter): \_\_\_\_\_ Date : \_\_\_\_\_

Tel. No.: \_\_\_\_\_ Fax. No.: \_\_\_\_\_

PART B (to be completed by Authorized Surveyor / Authorized Organization / Recognized Authority)

To : Owner of the vessel,

I, the undersigned, acknowledge and accept the above engagement.

Remarks or additional information (if any):

Signature of Authorized Surveyor / Authorized Organization Representative / Recognized Authority Representative\*: \_\_\_\_\_

Name of AS / AO Representative / RA Representative\* (in block letter): \_\_\_\_\_

Name of AO or RA: \_\_\_\_\_ Date : \_\_\_\_\_

Tel. No. : \_\_\_\_\_ Fax. No.: \_\_\_\_\_

Remark : Upon acceptance of engagement and signing of Part B, a copy of the completed "Notice of Engagement" shall be faxed by the owner to Marine Department. The original of this "Notice" shall be retained by the owner while the Authorized Surveyor / Authorized Organization / Recognized Authority shall retain a copy as record.

\* Delete where not applicable

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Personal Data Collection Statement

In accordance with the Personal Data (Privacy) Ordinance (Cap. 486), data subjects have a right to request access to and correction of their personal data provided in the application form. For access to or correction of personal data in the application form, please contact the Officer-in-charge, Local Vessels Safety Section of the Marine Department.