



MARINE DEPARTMENT
THE GOVERNMENT OF THE HONG KONG SPECIAL ADMINISTRATIVE REGION
DECLARATION OF SURVEY
SURVEY RECORD OF SAFETY EQUIPMENT

A / Particulars of Ship

Name of Vessel:-		Certificate of Ownership No. / Approval In Principle Ref. No.:-	
Port of Registry :	Class II A / B	Category	Type:- Plying Limits :
Length Overall (m):-		Length (L) (m):	
Extreme Breadth (m):-		Depth (m) :-	
Gross Tonnage:-		Net Tonnage :-	
Deadweight Tonnage (For Tanker) :-		Material of Hull :-	
Date on which keel was laid or ship was at a similar stage of construction :			
Date of Completion Survey of new building / conversion*:			
Type of Machinery and Power Output (in kW) :-			
Power Output of Auxiliaries (in kW) :-			
The Life Saving Appliances provide for a total of () persons onboard and no more			
Name and Address of Owner or Agent :			

Port and Date	Additional information, particulars of intermediate, partial or subsequent inspections, alterations or renewals		Signed

B/ LIFE BOATS & CLASS C BOATS										Comment (See remarks)
No. of boat	Description	Measurements			Cubic Capacity	No. of persons	Internal Buoyancy		Weight Fully Laden (tonnes)	
		Length	Breadth	Depth			Material	Cubic Capacity		
Boats to be numbered from forward, odd numbers starboard, even numbers port.										
Painters	Are painters required to be rigged at sea? [Yes / No]									
C/ DAVITS AND WINCHES										
Davits or Launch/Recovery Device	Description :						S.W.L. /set			
	Are they of sufficient strength to lower fully-laden boats ?									
Winches	Description :						S.W.L.			
	Dates of overhaul:									
Falls	Type of purchase									
	Rope or Wire : Construction :					Size : Breaking Strain				
	Dates of reversal or renewals :									
D/ INFLATABLE BOATS										
Maker's Name	Length			No. of Persons		Weight with equipment and engine (tonnes)		Stowage		
Type of Engine										
E/ LIFERAFTS										
Inflatable Liferrafts	Manufacturer and type		Persons		Number		Stowage		Date of Inspection	
Rigid Liferrafts										

F/ OTHER LIFE SAVING APPLIANCES								Comment (See remarks)
Buoyant Apparatus	Manufacturer and Type		Persons		Number		Stowage	
Lifejackets					Adult			
					Child			
	Number of Donning Instructions posted							
Lifebuoys	Type	Number without fittings	Number with lights	Number with lines	Number with smoke Exp. date	Number with smoke and lights Exp. date	Number Q.R. chutes	
	Stowage							
Is a table of life-saving signals available on the ship's bridge?				[Yes / No]				
G/ ROCKETS AND SIGNALS								
Line throwing appliance		Manufacturer and Description			Date of Manufacture	Date of Expiry		
					Rockets:			
Ship's Signals	Distress	Parachute						
		Red Star						
Lifeboat		Parachute						
Distress Signals		Hand Flares						
		Buoyant Smoke						
Means provided for emergency signals								
H/ NAVIGATIONAL PUBLICATIONS								
Charts			Latest N. to M.					
Sailing Directions			Lists of Lights					
Tide Tables			Latest M Notice					
International Code of Signals			List of Radio Signals					
Nautical Almanac			Nautical Tables					
Operating and Maintenance manuals for Navigational Aids								

I/ NAVIGATION LIGHTS							Comment (See remarks)
Latern	Maker	Lens Type : Mark	Lamp	Maker	Lens Type : Mark	Lamp/Burner	
Mast Head							
Mast Head							
Mast Head							
Mast Fore							
Port							
Starboard							
Stern							
Anchor							
Anchor							
Not Under Command							
Not Under Command							
Yellow Towing Light							
All Round Red (DG)							
Position of Sidelights				Breadth of Chocks			
				Port	Starboard		
Primary							
Alternative							
Spare Electric Bulbs/ Spare Slides				No			
Port							
Starboard							
Not Under Command							
J/ NAVIGATIONAL EQUIPMENT							
Equipment	Maker	Type	Serial No.				
Gyro compass							
Echo sounder							
Signalling lamp							
Magnetic compass			Date of last adjustment				

K/ SOUND SIGNALS, SHAPES AND ADDITIONAL LANTERNS

Item	Description	Comment (See remarks)
Diameter and Position of Bell		
Type of Whistle(s)		
Gong		
Number of NUC Shapes		
Black Diamond		
Additional Lanterns/Shapes		

L/ FIRE EXTINGUISHING

Type	Location	No.	Description		
Portable Extinguishers	Machinery Spaces				
	Crew Spaces				
Other Spaces					
Portable foam applicators; Mobile foam appliances	Machinery Spaces				
	Other Spaces				
Non-Portable Extinguishers					
Hoses Length With Couplings	Machinery Spaces				
	Other Spaces				
Plain Nozzles	Outside Machinery Spaces		Diameter of nozzle outlet =		
Dual Purpose Nozzles	Machinery Spaces		Equivalent diameter of nozzle outlet =		
	Other Spaces		Equivalent diameter of nozzle outlet =		
Fire Buckets					
Sand Boxes and Scoops					
International Shore Connection					

Type	No.	Description	Comment (See remarks)
Fire Pumps excluding Emergency fire pump			
Emergency fire pump			
Type	Location	Description	
Fixed Installations Including deck foam, and inert gas systems for tankers and water spray systems for RO/RO cargo spaces	Machinery Spaces and Cargo Pump Rooms		
	Cargo Spaces		

M/ FIREMEN'S OUTFITS

Item	No.	Description	
Breathing Apparatus			
Safety Lamps			
Axes			
Protective clothing			
Boots			
Gloves			
Helmets			

N/ FIRE DETECTION AND ALARM SYSTEM

Detectors	Location	Maker	Type	No.	Description	
	Machinery Space					
	Cargo Space					
	Accommodation and Service Spaces					
Control and Indicating Unit						
Manual call Points	Machinery Space Cargo Space Accommodation					

The machinery spaces of this vessel should not be operated other than with normal watchkeeping if any essential part of the alarm, control, or fault detection systems is inoperative.

O/ EMERGENCY CONTROLS		
Item	Description	Comment (See remarks)
Closing Devices		
Remote stops Item / location		
Other distant controls including oil fuel and lubricating oil tank outlet valves		
Location of controls for sea inlets discharges and bilge injection		
P/ EMERGENCY ELECTRIC POWER		
Source of Power including rating or capacity		
If generator, means of starting		
Services supplied		
Q/ STABILITY		
Particulars of stability data on board		
R/ MISCELLANEOUS		
Fire Control Plans inside and outside Deckhouse		
Inert Gas System Manual		
Pilot Ladder – details of equipment		
Bulwark ladder – if provided		
Accommodation Ladder details if point of access/ sea level exceeds 9 metres		
Pilot hoist – if provided and maintenance log book		
Survival craft Portable radio	Type :	Serial No.:
S/ EXEMPTIONS		
Rule or Regulation	Appliance	Conditions

Remarks on conditions

Each of the survey item in this declaration report must be classified /coded as indicated below:

- A = Condition satisfactory / acceptable
- AW = Acceptable with deficiencies which would neither affect seaworthiness of the vessel nor the safety of person onboard. Owner /agent is required to monitor for further deterioration and required to take appropriate remedial action (see report attached).
- N = Not acceptable (see report attached)
- NA = Not applicable

Remarks _____

I declare that the above surveys were conducted in accordance with the requirements of the Merchant Shipping (Local Vessels) Ordinance, Cap 548, and relevant regulations, codes and standards as required to my satisfaction. The survey confirms that the structure, equipment, system, fittings, arrangement, workmanship and material of the vessel and the condition thereof are in all respects satisfactory and that the vessel will in my judgment be sufficient until ⁽¹⁾

Supplement survey reports to be attached, if applicable. [Yes / No]

Signature of Authorized Surveyor / Authorized Organization (AO)

/ Recognized Authority (RA)*Representative: _____

Name of Authorized Surveyor / AO / RA*Representative (in block letter): _____

Name of AO or RA*: _____

Date : _____ Place of Survey : _____

Note: (1) It is normally not more than 12 months. In case of obvious deficiencies are found, the valid date (period from one month to two months) is to be proposed by authorized surveyor / AO / RA to be agreed with Marine Department in advance.

Report For Survey of Survey Record of Safety Equipment

Those survey items in this declaration report if classified/ coded as either “AW “or “N” are required to give details summary of comments in the table below.

- Note : AW = Confirm /check with deficiencies which would neither affect seaworthiness of the vessel nor the safety of person onboard. Owner /agent is required to monitor for further deterioration and required to take appropriate remedial action. (see attached report)
- N = Not acceptable (see attached report)

Survey Part & Item No.	Nature of defect / deficiency	Comments, including remedial action and evidence of rectification required before issuing Survey Record of Safety Equipment

Continued on separate sheet if necessary with page numbering..

Signature of Authorized Surveyor / Authorized Organization (AO)

/ Recognized Authority (RA)*Representative: _____

Name of Authorized Surveyor / AO / RA*Representative (in block letter): _____

Name of AO or RA*: _____

Date : _____

Follow-up Inspection of Remedial Items (if applicable)

Survey Part & Item No.	Nature of defect / deficiency	Comments, including remedial action and evidence of rectification required before issuing Survey Record of Safety Equipment

Continued on separate sheet if necessary with page numbering..

Signature of Authorized Surveyor / Authorized Organization (AO)

/ Recognized Authority (RA)*Representative: _____

Name of Authorized Surveyor / AO / RA*Representative (in block letter): _____

Name of AO or RA*: _____

Date : _____

Personal Data Collection Statement 收集個人資料聲明

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.

根據《個人資料（私隱）條例》（第 486 章），資料當事人有權要求查閱及改正在此申請表提供的個人資料。如須查閱或改正此申請表的個人資料，請與海事處本地船舶安全組聯絡。