## APPLICATION FOR BUNKER CIVIL LIABILITY CERTIFICATE (BCLC)

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| A. DETAILS OF APPLICANT |
| Name of Applicant  |       |
| Relation to Vessel  |       | OWNER      | MANAGER      | AGENT      | AUTHORIZED APPLICANT      |
| B. CONTACT DETAILS APPLICANT |
| Telephone No. |       |
| Email/FAX No. | Office:       | Mobile:       |
| Address for Courier |            |
| Name and Address of billing party |       |
| C. VESSEL DETAILS(Copy of blue card for Non Guyana flagged Vessels / Copy of Ship Registry Certificate.) |
| S. No. | Name of the Vessel | Official Number | Name of Insurer | Insurer Recognized by Flag?Yes/no |
|       |       |       |       |       |
|       |       |       |       |       |
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|       |       |       |       |       |
| I       hereby submit this application for issuance of the Bunker Convention certificate by the International Maritime Safety Agency of Guyana (IMSAG)and confirm all details provided are correct. |
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| Submission of application does not confirm issuance of certificate, all applications will be reviewed by the Registry and Certificate will be issued upon payment of fee. |

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| OFFICIAL USE ONLY |
| Date Received      | Received By      | Reviewed by      | Invoice No.      |