International Ships Registry of Guinea-Bissau

G-B International

***APPLICATION FOR APPROVAL AS P&I CLUB BY THE INTERNATIONAL SHIPS REGISTRY OF GUINEA-BISSAU***

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| **Part A - PERSONAL DETAILS OF APPLICANT (ON BEHALF OF THE COMPANY)** | | | | | | | |
| 1) **Family name:** | | | | | 2) **Given name(s):** | | |
| **Address of Applicant:** | | | | | | | |
| 3) *Address Line 1* |  | | | | | | |
| 4) *Address Line 2* |  | | | | | | |
| 5) **Town/City** |  | | | | 6) **County/State** |  | |
| 7) **Post/Zip Code** (if available) | |  | | | | | |
| 8) **Country** |  | | | | | | |
| 9) **Tel:** | | 10) **Fax:** | 11) **Email:** | | | | |
| 10) **Passport No:** | | 12) **Nationality:** | 13) **Date of birth** (dd/mm/yy)**:** | | | | 14) **Place of birth:** |
| **Part B - BUSINESS DETAILS** | | | | | | | |
| 15) **Name:** | | | | 16) **Type** (e.g., Limited Liability Co., Partnership, Sole Proprietorship) | | | |
| 17) **Address** (If same as Applicant, state “same as above”) | | | | | | | |
| 18) *Address Line 1* |  | | | | | | |
| 19) *Address Line 2* |  | | | | | | |
| 20) **Town/City** |  | | | | 21) **County/State** |  | |
| 22) **Post/Zip Code** (if available) | |  | | | | | |
| 23) **Country** |  | | | | | | |
| 24) **Tel:** | | 25) **Fax:** | 26) **Email:** | | | | |

27) **Part E – DECLARATION – TO BE COMPLETED BY ALL APPLICANTS**

I hereby declare that the information contained in this application is true and correct and I apply for Approval as “P&I Club by the International Ships Registry of Guinea-Bissau”

## 28) Signature of Applicant 29) Date of Application

Please keep your signature within the box and sign without touching any of the box lines

# 30) Part C – SUPPORTING DOCUMENTS REQUIRED WITH APPLICATION

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| **SUPPORTING DOCUMENTS REQUIRED (all applications)** | | ***Attached Electronically***  ***(please tick)*** |
| **1** | A general reference to the Company’s portfolio and number of vessels insured. |  |
| **2** | Certificate of Incorporation indicating the list of named managers and persons in charge of the company. |  |
| **3** | The rating that the insurance company and/or its reinsurers hold by an independent and internationally recognized rating agency. |  |
| **4** | A complete Contact List of the department in charge of issuing and canceling Blue Cards on behalf of the company. The contact list must contain direct email, telephone and fax numbers, and direct website links for the online verification of Blue Cards. |  |
| **5** | Adequate documentation regarding the company’s financial standing and hence solvency. The information could be in the form of audited financial statements, combined statements of cash flows, combined director annual reports, and combined reserves capital from the past three years duly authenticated and signed by the auditor. |  |
| **6** | Adequate documentation on reinsurance coverage on claims met by the company for liability incurred. These documents can include a valid reinsurance program/treaty. |  |
| **7** | Adequate documentation on approval by the relevant authority that the company is eligible to carry out insurance business in the country of authority. |  |
| **8** | A guarantee by the company and its parent company, if one exists, that it will cover liability. |  |
| **9** | A statement to the effect that liability incurred, due to an act of terrorism rating agency. |  |
| **10** | Declaration of Compliance with any Sanction, Prohibition, or Restriction under United Nations resolutions or if applicable the trade or economic sanctions, laws, or regulations of the European Union, United Kingdom, or the United States of America. |  |
| **11** | If the Company has been approved by any other Flag State Administration, please send us a copy of the approval. |  |
| **12** | Sample of the Financial Security Certificates and the list of authorized personnel to sign on. |  |

## EXPLANATORY NOTES FOR APPLICANTS

* 1. Failure to complete the Application Form fully or submit the required documentation may result in rejection or delays in processing.
  2. Applicants must sign in the box shown, keeping their signature within the box lines.
  3. Applicants may submit their application by scanning the Application Form and supporting documents and submitting by email

to [rmedawar@gbi-lb.org](mailto:rmedawar@gbi-lb.org) with a copy to [gbi@gbisr.com](mailto:gbi@gbisr.com).

* 1. All supporting documents submitted must be clear copies and legible and in English.
  2. For more information contact G-B International: Email [gbi@gbisr.com](mailto:gbi@gbisr.com), Tel. +30 2104529425

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| --- | --- | --- | --- |
| **DATE RECEIVED** | **DATE ASSESSED** | **RESULT – AUTHORISED/REJECTED** | **NOTES** |
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| --- | --- | --- |
| (name-signature) |  | (name-signature) |
| Approved by theDeputy General Ships Registrar |  | Approved by theGeneral Ships Registrar |