



INTERNATIONAL MERCHANT MARINE REGISTRY OF BELIZE

GENERAL SAFETY INSPECTOR APPLICATION FORM

TDF-004

LAST NAME OF APPLICANT	FIRST NAME	MIDDLE INITIAL	
DATE OF BIRTH	PLACE OF BIRTH		
MONTH / DAY / YEAR	CITY	COUNTRY	
MAILING ADDRESS		PHONE NUMBER: _____ MOBILE NUMBER: _____ E-MAILADDRESS: _____	
SEX: MALE FEMALE	LANGUAGES SPOKEN <input type="checkbox"/> ENGLISH <input type="checkbox"/> SPANISH <input type="checkbox"/> FRENCH <input type="checkbox"/> OTHER Please specify if choice is other _____		
NAME AND ADDRESS OF COMPANY _____ _____ _____		NAME(S) OF SURVEYING ORGANIZATIONS AFFILIATED WITH	
		EXCLUSIVE	NON-EXCLUSIVE
COUNTRY AND PORT (S) INTERESTED TO BE APPOINTED:			
COUNTRY	PORT	DISTANCE FROM THE HOME PORT	TRAVEL EXPENSES (IF APPLICABLE)
GENERAL EDUCATION			
FROM	TO	ACADEMY/UNIVERSITY	DEGREE
TECHNICAL EDUCATION			
YEAR	COURSE NAME	ACADEMY/TRAINING CENTER	AWARD
SEAGOING OR COMMERCIAL EXPERIENCE			
FROM	TO	JOB TITLE/POSITION	COMPANY NAME

MINIMUM REQUIRED DOCUMENTS/INFORMATION TO BE SUBMITTED ALONG WITH THIS FORM:

1. Curriculum Vitae
2. University Diploma or Equivalent.
3. Copies of Marine Surveyor and Lead Auditor Courses (or any course attesting the qualification as marine surveyor and marine auditor).
4. Business references and any other official document attesting to the qualification as a nautical inspector.
5. List of vessels being surveyed by you during the past 12 months.
6. Copy of a Marine Casualty Investigator Course, if available.
7. If the above is provided, a list of vessels being investigated during the past 12 months.
8. Type of system to be used for monitoring Belize Vessels arriving at or close to any port in your area.
9. Copy of any other course taken that can help us during our evaluation.
10. Two (2) Passport Size Pictures (2.5 x 3 CM)

SIGNATURE OF APPLICANT

DATE

PLEASE COMPLETE IN TYPE WRITTEN FORMAT