

MSS	Merchant Shipping Secretariat Seafarer Registration Unit C.D.C. Revalidation Application	<i>Document no</i>	<i>SH-FO-02</i>
		<i>Date of 1st issue</i>	<i>2015-06-01</i>
		<i>Reviewed by</i>	<i>MR</i>
		<i>Approved by</i>	<i>DGMS</i>
		<i>Revised status</i>	<i>01</i>
		<i>Revised date</i>	<i>13.07.2016</i>

01. Name :

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02. Permanent Address ..:

.....
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03. Telephone No. :

04. C.D.C. No. : **Rank:**.....

05. Date of Issue : **Date of Expiry:**.....

06. Revalidation fees Rs. 1,000 to be paid to the Cashier and the receipt to be attached.

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Date

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Signature.

07. Office Use Only

Verification of the relevant ledger and other supporting Documents.



Whether any inquiry is pending against him.

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Date

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Signature of subject Clerk

Approval of the Shipping Officer /Examiner:

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Date

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Signature of Shipping Officer

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Date

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Signature of Examiner