



(To be filled out by Company)

**INFORMATION NEEDED TO COMPLETE THE
CONTINUOUS SYNOPSIS RECORD (CSR)
DOCUMENT NUMBER 1
FOR THE SHIP WITH IMO NUMBER: IMO _____**

This is for new buildings only . Dates should be in the format yyyy/mm/dd

Information		
1	This document applies from (date):	
2	Date of registration:	
3	Name of ship:	
4	Name of Registered Owner: Registered address(es):	
5	Registered Owner IMO identification number	
6	Name of Company (International Safety Management): Registered address(es): Address(es) of its safety management activities if different from registered address:	
7	Company IMO identification number	
8	Administration/Government/Recognized Organization which issued the Document of Compliance: Body which carried out audit (if different):	
9	Administration/Government/Recognized Organization which issued Safety Management Certificate: Body which carried out audit (if different):	
10	Administration/Government/Recognized Organization which issued International Ship Security Certificate: Body which carried out verification (if different):	

THIS IS TO CERTIFY THAT this record is correct in all respects

Issued by the Company: _____ Date of issue: _____

Signature of authorized person: _____

Name of authorized person: _____