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|  |  | *Do not post / write* *in this space!**(intended for eGOP barcode)* |
|  Name and surname or title of the applicant |  |

**MINISTRY OF THE SEA,**

**TRANSPORT AND INFRASTRUCTURE**

 **Zagreb, Prisavlje 14**

 **Fax: 01 6169 069**

 **Email:** charter@pomorstvo.hr

**eCrew**

 **REQUEST FORM**

We wish to request the assignment of user rights for the central database and the password to use the Application for the registration of the Crew and Passenger List, according to the provisions of the Ordinance on the conditions for conducting the activity of chartering of vessels with or without crew and the provision of guest accommodation services on vessels(OG no. 42/17).

**Title of the charter company:**

**Seat of the charter company:**

**Personal identification number of the charter company (PIN):**

**VAT identification number of the charter company (VAT ID No.):**

**Name and surname of the responsible person:**

**Name and surname of the person responsible for safety:**

**E-mail address:**

**Telephone or mobile number:**

**Name and surname of the persons carrying out the registration of Crew and Passenger Lists** *(to add if necessary)*:

1.

2.

3.

**Croatian charter base or berthing place of the vessel:**

**Title of the tax representative** *(obligatory for charter companies having the head office outside of Croatia)*:

Personal identification number (PIN) of the tax representative:

Name and surname of the responsible person:

E-mail address:

Telephone or mobile number:

**Name of the maritime agent** *(legal/natural person registered in the Register of Maritime Agents of Croatia), if any:*

Personal identification number (PIN) of the maritime agent:

E-mail address:

Telephone or mobile number:

**List of vessels:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Name** | **Mark:****IMO/Official/Registry No.** | **Flag** |
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|  Date of submission of request Signature/seal of applicant |  |