APPLICATION FOR EXEMPTION FROM REGULATIONS

NOTES:

a)This form may take you 5 minutes to fill in. You will need the following information to fill in the form: 1) Ship's particulars & 2) Details of certificate concerned.

b)Please complete the application form and submit it through the Classification Society to Maritime Affairs Department, Ports and Maritime Transport Authority of Libya (email: smepm@lma.ly/ Fax No: + 218 (0)21 489 1356).

- c) Please enclose a copy of the relevant certificates or documents, which requires exemption.
- d)Please submit the application for extension at least 5 working days before the expiry of the certificate.

e) Please note that p	rocessing time is no	ormally within 3 wo	rking days.	
1. Name of Vessel:			2. Ship Type:	
3. Gross Tonnage:			4. IMO Number:	
5. Keel Laid Date:			6.Official Numb	er:
7. Classification Socie	ety:			
	•	tificate (e.g. interna		national, 30-mile limit, etc.)
	certificate for whic	h the exemption is	required (e.g. Car	go Ship Safety Equipment):
main certificate, if av	society which will i		ficate and the exp	ected expiry date of the
11. Reference of regulation n	ılation(s) from whicumber):	ch exemption is req	uired (title of regu	ulation or convention,
12. Reasons for reque 13. The provision in t	esting the exemptions which	on:ch allows exemptio	n to be granted:	
14. Actual situation o	f the ship, conditio	ns to be imposed o	r alternative arran	• • •
15. Copy of exemption applies to application	on certificate or lett n for an exemption	er of approval issue which was granted	ed by the previous by the previous fl	•
16. Other comments	/ information:			
Name:		(Ow	ner / Company /	Agent*:)
Telephone No.:		Fax No.:	E	mail:
Date:				

^{*} Delete as appropriate