

MERCHANT SHIPPING ACT REGULATIONS 2009

Form Msa1(a)



APPLICATION FORM FOR APPROVAL OF A SHIPPING LINE WISHING TO PARTICIPATE IN KENYA 'S INTERNATIONAL SEABORN TRADE

1. Name of Shipping Company Address	2. Name of Managing Agents/ Operators Address	3. Local Agents Address
4. Route(s) served (attach copies)	5. Frequency of sailings (attach copies)	6. Cargo carrying for the last 2 years (in weight tons & frieght tons)
7. Tarrifs for each Route (attach copies)	8. Conditions of carriage (B/L clauses) for each route (attach copies)	9. Details of cargo sharing/Pooling arrangements with other lines for each route (use extra sheet in case needed)
10. Other Cooperation Agreements with other lines for each route (use extra sheet in case needed)	11. Nationality (supporting documents to be attached)	12. Head Office Of Manage- ment and effective seat of control

I/We hereby declare that the informaton given herein is correct to the best of my/ our knowledge and I/We undertake to abide by the above stated Act.

Signed on this day.....of..... in the year.....

Name..... Designation..... Signature.....

Stamp/Seal

13.

FOR OFFICIAL USE ONLY

Fee paid for Application Forms Kshs/USD..... Receipt No.	Registration fee paid Kshs/USD..... Receipt No.
Certificate No.....	Approved by (Name).....
Valid Till.....	Remarks.....
Designation.....	Signature..... Date.....

NB: Additional information can be provided separately and attached to this form.