Sjøfartsdirektoratet
Norwegian Maritime Authority

Application for insurance certificate

Use one form for each ship

Name of the ship	
Call sign.	
IMO No.	
Flag state	

Company:			
Contact person:		**E-mail:**	

Choose certificate type

☐ **Wreck removal certificate (WRC)**

☐ **Certificate of Insurance or Other Financial Security in Respect of Civil Liability for Bunker Oil Pollution Damage (CLB)**

☐ **Certificate of Insurance or other Financial Security in respect of Civil Liability for Oil Pollution Damage (CLC)**

☐ **Certificate of Insurance or Other Financial Security in Respect of Liability for the death of and personal injury to passengers (PLR)**

☐ **The applicant hereby confirms that the "carrier who actually performs the carriage" recorded on the Blue Card is the person actually performing the carriage, cf. Article 4a of Annex I to Regulation (EC) No 392/2009, cf. section 418 of the Norwegian Maritime Code.**

Valid Blue Card(s) from an approved insurance company must be enclosed.

Place and date

_____
Signature of ship owner or on behalf of ship owner