



THE KINGDOM OF CAMBODIA
ISROC
International Ship Registry of Cambodia

**GENERAL INFORMATION OF APPLICANT / SHIP OWNER /
COMPANY RESPONSIBLE FOR OPERATION**

VESSEL'S NAME

APPLICANT

NAME	
ADDRESS	
PASSPORT ID NO.	
PHONE	
FAX	
E-MAIL	

SHIPOWNER

NAME	
ADDRESS	
PHONE	
FAX	
E-MAIL	

COMPANY RESPONSIBLE FOR OPERATION

NAME	
ADDRESS	
PHONE	
FAX	
E-MAIL	

I _____, applicant / ship owner/ company responsible for Operation, confirm that the information consigned in this form is correct and true.

Signature of Applicant / ship owner / company responsible for Operation

Note : cross out the words that don't apply

I, _____, appointed Deputy Registrar, hereby confirm that the information consigned in this form is definitely correct and true.

Deputy Registrar's Signature

Note : if applicant, ship owner, company responsible for operation is company name, it will have to specify company name as well as the name of person in charge of the matters related to the vessel.