

SPECIMEN COPY

TO
THE SHIPPING MASTER
GOVERNMENT SHIPPING OFFICE
C.G.O. BUILDING NO.1
AGRABAD, CHATTOGRAM-4100

SUBJECT: REQUEST FOR SIGN-OFF FROM THE ARTICLES OF AGREEMENT OF
M.V/M.T.....

DEAR SIR

WE SHALL BE HIGHLY OBLIGED IF YOU KINDLY ARRANGE TO SIGN-OFF THE FOLLOWING SEAFARER/SEAFARERS FROM THE ARTICLE OF AGREEMENT OF THE CAPTIONED VESSELS. WHO WAS/WERE ALREADY RELEASED FROM THE VESSEL ON FULFILLMENT OF HIS/THERE CONTRACT AND PAID FULL WAGES ONBOARD.

SL.NO.	NAME	CDC NO.	RANK	ENGAGEMENT DATE & PLACE	DISCHARGE DATE & PLACE
01					

M.V/M.T.....

PORT OF REGISTRY :
IMO NO. :
GRT :
DWT :
NAME & ADDRESS OF OWNER/MANAGER :
~~CSL SHIP MANAGEMENT PTE LTD~~
~~143 CECIL STREET~~
~~#19-04A BANKOK, NANK BUILDING,~~
~~SINGAPORE 069542~~
EMAIL: denise@chelseaship.com
TELL. +65 6718 0271

WE ARE ASSURING YOUR GOOD SELF THAT THE SAID VOYAGE OF THE SEAFARER/SEAFARERS IS/ARE GENUINE AND IN FUTURE IF ANYTHING FOUND FAKE/WRONG REGARDING THE VOYAGE, WE WILL BE FULLY RESPONSIBLE AND LIABLE. WE ARE ALSO ASSURING YOU TO OBEY ANY DECISION TAKEN BY THE CONCERNED AUTHORITY REGARDING THE MATTER IN FUTURE.

THANKING YOU
YOURS FAITHFULLY

NAME:.....
CREW MANAGER
(.....MEANING AGENT'S NAME)