

# DEMOCRATIC SOCIALIST REPUBLIC OF SRI LANKA MERCHANT SHIPPING SECRETARIAT MINISTRY OF PORTS AND SHIPPING

1st Floor, Bristol Building, 43-89, York Street, Colombo 01, Sri Lanka.

Telephone: +94(0)112435127, Fax: +94(0)112435160, E-mail: <a href="mailto:dmsmos@sltnet.lk">dmsmos@sltnet.lk</a>

#### MSS Cir/ 03- 2020-revised

13July 2020

Notice to all Ship-Owners, Operators and Seafarer Recruitment and Placement Service (SRPS) Providers

### **On-line Sign on Procedure**

In view of enhancing the efficiency of the existing on-line sign on procedure and reducing the exchange of number of documents, it was decided to adopt following procedure with immediate effect.

1. Every company which is operating ships registered in Sri Lanka, or is responsible for the assignment of seafarers for service on ships in accordance with the provisions of the STCW Convention, responsible for ensuring that each seafarer assigned to its ships hold an appropriate certificate in accordance with the provisions of the STCW Convention and as established by the administration. ( as prescribed by the Merchant Shipping (Standards of Training, Certification and Watchkeeping for Seafarers) Regulations, 2016)

Accordingly, it is not required to forward copies of CoPs or CoCs of seafarers who intend to sign on unless otherwise specifically requested by the Shipping Officer.

In addition to above, it is the responsibility of the SRPS provider to ensure that the seafarer has a valid CDC and a passport.

- 2. Following documents shall be submitted to the Shipping Officer by email;
  - a. Duly completed Seafarer engagement confirmation letter as given in the annex to this circular (this letter shall prepared in duplicate in which one signed copy shall be given to the seafarer);
    - Evidence to show that an offer and acceptance of an offer of the **terms and conditions of the Sri Lanka** Crew agreement has been expressed in electronic form between the SRPS provider and the seafarer;
  - b. Copy of the bank deposit slip; and

c. Sign off letter of the immediate previous contract and copy of the CDC page that showing the last engagement.

\*Upon successful verification of above documents, Shipping Officer will confirm the sign on by an email message to the SRPS provider and the seafarer.

\*\*In case the seafarer has not departed Sri Lanka to join the assigned vessel after receipt of sign on confirmation or deserted the vessel or not completed the contract of employment, the SRPS provider shall inform such details to the Shipping officer as soon as possible by an email.

\*\*\* shippingoffice@sltnet.lk shall be used to communicate with the Shipping officer.

#### 3. Working hours

- Weekdays (excluding public holidays) from 8.30 AM to 4.00 PM
- Extra charges will be applied for any sign on that takes place after normal office hours **and during public holidays.**

#### 4. Fees

Applicable fees shall be in accordance with the Merchant Shipping (Amendment) Fees Regulations-Gazette No.1471/11.

#### 5. Record keeping

All records pertaining to on-line sign on of seafarers shall be maintained preferably in electronic form for a period as specified by the individual safety management system of SRPS providers which shall not be less than 2 years in any case.

Issued on 13July 2020

Director General of Merchant Shipping Merchant Shipping Secretariat Ministry of Ports and Shipping

Tel: +94-11-2435127 / +94-11-2430305

Fax: +94-11-2435160 E-mail: dmsmos@sltnet.lk Web: www.dgshipping.gov.lk

## (On Company Letterhead)

## **Seafarer Engagement Confirmation Letter**

Merchant Shipping Secretariat.	
Colombo Sri Lanka	
We hereby declare and affirm that we entered into the Sri Lanka Crew Agreement (CA) at	
Further confirm that as Owners/Crewing Agent , we agree with the terms and conditions stipulated in the CA and the same was executed after having thoroughly verified the details of the seafarer mentioned below and accepted by us .	
Full Name	
Address	
Date of Birth	Wages (Basic):
CDC Number	O.T.:
Passport Number	Other Allowances:
Last Ship Date of Discharge	Allotment:
Rank:	Contract Period:
Contact details –Residence NoMobile	eEmail
Payment Receipt Date, Bank and Reference Number	
Owner/Agent	Seafarer
Signature:	Signature
Name	Name. :
Designation:	
Company Seal	
Acknowledged and accepted	

**Assistant Shipping officer** 

The Shipping officer,