



WRITTEN RECORD MADE OF COUNT OF ALL PERSONS ON BOARD

For Vessels Transferring Persons

DATE: _____ VESSEL: _____

Before Departure to site	Permanent Arrivals/Departures	Before departure from site 1	Before departure from site 2
Passengers <input style="width: 40px; height: 25px;" type="text"/> + Crew <input style="width: 40px; height: 25px;" type="text"/> + Others <input style="width: 40px; height: 25px;" type="text"/> = Total number of persons on board: <input style="width: 40px; height: 25px;" type="text"/>	Total persons on board <input style="width: 40px; height: 25px;" type="text"/> + Persons leaving <input style="width: 40px; height: 25px;" type="text"/> + Persons boarding <input style="width: 40px; height: 25px;" type="text"/> = New total number of persons on board: <input style="width: 40px; height: 25px;" type="text"/>	Passengers <input style="width: 40px; height: 25px;" type="text"/> + Crew <input style="width: 40px; height: 25px;" type="text"/> + Others <input style="width: 40px; height: 25px;" type="text"/> = Total number of persons on board: <input style="width: 40px; height: 25px;" type="text"/>	Passengers <input style="width: 40px; height: 25px;" type="text"/> + Crew <input style="width: 40px; height: 25px;" type="text"/> + Others <input style="width: 40px; height: 25px;" type="text"/> = Total number of persons on board: <input style="width: 40px; height: 25px;" type="text"/>
Verification of Number Signature: _____	Verification of Number Signature: _____	Verification of Number Signature: _____	Verification of Number Signature: _____



WRITTEN RECORD MADE OF COUNT OF ALL PERSONS ON BOARD

For vessels not transferring persons

DATE: _____ VESSEL: _____

Before Departure to site	Before departure from site 1	Before departure from site 2
Passengers <input style="width: 40px; height: 20px;" type="text"/> + Crew <input style="width: 40px; height: 20px;" type="text"/> + Others <input style="width: 40px; height: 20px;" type="text"/> = Total number of persons on board: <input style="width: 40px; height: 20px;" type="text"/>	Passengers <input style="width: 40px; height: 20px;" type="text"/> + Crew <input style="width: 40px; height: 20px;" type="text"/> + Others <input style="width: 40px; height: 20px;" type="text"/> = Total number of persons on board: <input style="width: 40px; height: 20px;" type="text"/>	Passengers <input style="width: 40px; height: 20px;" type="text"/> + Crew <input style="width: 40px; height: 20px;" type="text"/> + Others <input style="width: 40px; height: 20px;" type="text"/> = Total number of persons on board: <input style="width: 40px; height: 20px;" type="text"/>
Verification of Number Signature: _____	Verification of Number Signature: _____	Verification of Number Signature: _____