

F.A.N.I.M.A.R. Fondo Assistenza Nazionale Integrativa Marittimi

Via Milano 40/C int. 3 - Sc. Dx 16126 GENOVA
Tel. 010/2518524 – www.fanimar.it - e-mail: info@fanimar.it

APPENDIX: COVERAGE FOR WITHDRAWAL OF SEAMAN'S BOOK AND PROFESSIONAL TITLE

€190.00/year/sailor

€0.52(7) /day/sailor

(Officers, Subofficers, Ratings, and if applicable, Masters and Deck Officers of minor vessels)

In accordance with the National Agreements of 20/12/2002 and subsequent renewals of the C.C.N.L. signed in Rome, we provide you with the following details:

Shipping Company _____ Maritime Agency _____
Contact Person: Mr./Ms. _____
Address _____ Postal Code _____ City _____
Telephone _____ Fax _____ Email _____

Bank Transfer to F.A.N.I.M.A.R. at UNICREDIT BANCA SPA

IBAN CODE: IT11Q0200801458000100215555 - Account Number: 000100215555 - A.B.I.: 02008 - C.A.B.: 01458 - C.I.N.: Q

Total Amount €: _____ for a total of _____ EU sailors.

Note: Calculations for the addition of personnel during the insurance year should be calculated on a “three hundred and sixtieths” basis

(nr. _____ of personnel on command only on board ships)

Of which:

- nr. _____ in C.R.L. both on duty and off-duty onshore;
- nr. _____ in T.P. and/or T.G. only on duty.

Among these:

nr. _____ of Masters and/or nr. _____ Deck Officers of Minor Vessels (C.R.L. T.P. T.G.)

Note: For coverage of Captains and/or Directors, it is essential to specify the number as requested above for potential indemnity.

Total number of vessels covered (IMO Number - Type – Name – Tonnage – Operational Table - Registered in International Registry (R.I.): refer to Confitarma Circular No. 33 of 19.02.2004):

NR. IMO	TYPE	NAME	TSL	EXERCISE TABLE	R.I.

Total insured ships _____ from _____ to _____ days _____

STAMP AND SIGNATURE OF SHIPOWNER/AGENCY

Note: Kindly send us the duly completed forms before proceeding with the bank transfer.

SPACE RESERVED FOR FANIMAR					
APPENDIX OF DAYS	()		Coverage €	_____	
From	to	days	Dec.	SM	_____
FANIMAR SIGNATURE	Home Banking of _____				