

**Maharashtra Maritime Board**



**(Through “Board of Examinations for Seafarers Trust”)**

**Application Form**

**Re-validation of Certificate of Competency under IV Act, 1917,  
as amended**

**1) Details of CoC to be revalidated**

- a) No. of COC \_\_\_\_\_  
b) Grade \_\_\_\_\_  
c) Date of Issue \_\_\_\_\_

Paste your recent  
color photographs  
on **white**  
**background**  
*Stamp Size*

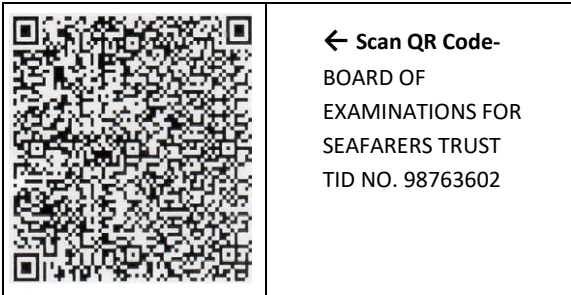
**2) Details of the Candidate**

- a) Name \_\_\_\_\_  
b) Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
c) Mobile No \_\_\_\_\_  
d) Email \_\_\_\_\_

**3) Details of the Fees Payment**

- a) To BES Rs.664/-

UPI No:- \_\_\_\_\_ Date:- \_\_\_\_\_



- b) To MMB Rs.782/-

By Demand Draft Payable to **“Maharashtra Maritime Board, Mumbai”**

**4) List of documents to be Attached**

- a) Original **sea-service** certificate, with duly Notarised Affidavit, for service on Inland Vessel for a minimum of one year during the preceding five years.
- b) Self-attested copy of CoC **along with Original CoC**, to be revalidated
- c) UPI Payments Receipt for **Rs. 664/-** for the **BES**
- d) Original Demand Draft for **Rs. 782/-** payable to the Maharashtra Maritime Board, Mumbai
- e) Self-attested copy of valid Re-fresher course certificate for 04 basic STCW course & STSDSD
- f) Self-attested copy of valid revalidation course certificate, issued by IMU Mumbai Campus
- g) Valid DG Approved Medical Certificate

**5) Declaration**

I do hereby declare that, particulars contained in this Application are correct and true to the best of my knowledge and belief, and that the attached documents are genuine and signed by the person whose name appear on them. I make this declaration consciously believing it to be true.

Date \_\_\_\_\_

Place \_\_\_\_\_

**Signature of the Applicant**

**6) Office Use**

- a) Application Verified / Not Verified

Signature of Assessed officer BES \_\_\_\_\_

Date \_\_\_\_\_

- b) Details of re-validation certificate issued

Name of Candidate \_\_\_\_\_

Revalidation Sticker No \_\_\_\_\_

Signature of BES Staff \_\_\_\_\_

Date \_\_\_\_\_