



PAPUA NEW GUINEA PORTS CORPORATION LIMITED

ISPS CHECK LIST

NO:

PORT: _____ **DATE:** _____

ARRIVE DATE: _____ **TIME:** _____

VESSEL: _____ **VOYAGE:** _____ **AGENT:** _____

SECURITY LEVEL AT WHICH THE SHIP IS OPERATING INTERNATIONAL SHIP SECURITY CERTIFICATE (ISSC) SIGHTED? **Yes/No**

IS THE ISSC VALID? **Yes/No**
SECURITY CERTIFICATE NO:
SECURITY FOLDER NO:

LAST 10 PORTS OF CALL

PORT	COUNTRY	SECURITY LEVEL

DECLARATION OF SECURITY (DOS) REQUESTED? **Yes/No**
DOS PROVIDED: **Yes/No**
DOS FORM NO:

REMARKS:

BOARDING OFFICER

DATE

TIME