



REPUBLIC OF THE MARSHALL ISLANDS
MARITIME ADMINISTRATOR

11495 Commerce Park Drive
Reston, Virginia 20191-1506 USA
Tel: +1-703-620-4880
Fax: +1-703-476-8522
Email: WRLC@register-iri.com

Nairobi International Convention on the Removal of Wrecks, 2007
Non-State Party Vessel Application Form

Please complete this document and submit, along with electronic copies of the current, valid Certificate of Registry and the Blue Card issued by a member of the **International Group of P&I Clubs** certifying the existence of a valid policy of insurance in compliance with Article 12 of the Nairobi International Convention on the Removal of Wrecks, 2007, to WRLC@register-iri.com. Once the application has been accepted, an invoice and payment instructions will be emailed to you. Upon confirmation of payment, the Certificate of Insurance or Other Financial Security in Respect of Liability for the Removal of Wrecks (WRLC) will be forwarded via email to the email address provided in the email field under Requesting Entity. WRLC validity may be verified at www.register-iri.com.

Vessel Name	Port of Registry	Gross Tons	Distinctive Number or Letters	IMO Number

Registered Owner

Name of Registered Owner:	
Principal Place of Business Address Line 1:	
Principal Place of Business Address Line 2:	
City:	State/Province:
Country:	Postal Code:
Telephone:	Email:

Insurer Details (as stated on Blue Card)

Name of Insurer:	
Principal Place of Business Address Line 1:	
Principal Place of Business Address Line 2:	
City:	State/Province:
Country:	Postal Code:

Requesting Entity and email address for receipt of electronic WRLC

Check if same as Registered Owner

Name of Entity Requesting WRLC:	
Principal Place of Business Address Line 1:	
Principal Place of Business Address Line 2:	
City:	State/Province:
Country:	Postal Code:
Telephone:	Email:

Payment Information (fee must be paid in advance of WRLC issuance) ¹

Check if same as Requesting Entity

Name of Entity Making Payment:	
Billing Address Line 1:	
Billing Address Line 2:	
City:	State/Province:
Country:	Postal Code:
Telephone:	Email:

I, _____, represent the above applicant vessel. I attest that absolutely no legal or natural person holding registered or beneficial ownership of the applicant vessel, nor their subsidiaries and/or affiliates, is a resident, national, or citizen of any comprehensively embargoed nation, to include Cuba, Syria, Sudan, North Korea, and Iran, nor is an individual or entity on the List of Specially Designated Nationals and Blocked Persons or its equivalent, as published by the European Union, United Nations, or United States. By submitting this application, I swear or affirm that the above and foregoing representations are true and correct to the best of my information, knowledge, and belief.

Date:

¹ To expedite receipt of the WRLC, it is recommended that payment of the invoice be made online at <https://www.tcmi-inc.com/miPayments/index.cfm/Payment/maritime>.