

Nicaragua international aquatic transportation Administration

Website: www.niataregister.org, Email: niata@niataregister.org

DECLARATION OF DESIGNATED PERSON(S) ASHORE - ISM CODE (FORM ISMDP)

To ensure the safe operation of each vessel and to provide a link between the "Company" and those on board, every "Company" shall all designate person(s) ashore (DPA(s)) having direct access to the highest level of management. The responsibility and authority of the DPA(s) shall include monitoring the safety and pollution prevention aspect of the operation of each vessel and ensure that adequate resources and shore-based support are applied, as required.

| the operation of each vessel and ensure th | nat adequate r | esources | and s | shore-b | ased su | ipport are | applied, as required. | |
|----------------------------------------------------------------------------------------------------------|----------------|----------|---------------------|---------|----------|------------|-----------------------|--|
| The undersigned affirms that: Name of DPA | | 24hr | 24hr Mobile Contact | | | Email | | |
| (1) | | | | | | | | |
| (2) | e) | | | | | | | |
| Has/have been assigned as the DPA(s) in action following Nicaragua International Aquatica | | | | | | | | |
| Name of Vessel | | | | | or SMC | | IMO Number | |
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| | | | | | | | | |
| And undertaken that the said DPA(s) will be Contact details of the DPA(s) to which offic Name Of Company | | | | | ay be se | | | |
| | | | | | | | | |
| | | | | | | | | |
| Telephone | Fax | | | Email | | | | |
| | | | | | | | | |
| Full Address | | | | | | | | |
| The undersigned individuals further unders fax/email. Any change will be acknowledge | • | _ | | | | st be made | e in writing by | |
| Title of DPA | | | | Date | | Signat | Signature | |
| | | | | | | | | |
| | | | | | | | | |
| Name & Title of Senior Management of "Company" | | | | Date | | Signature` | | |
| | | | | | | | | |
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