



# 406 MHZ EPIRB REGISTRATION FORM

(PLEASE COMPLETE IN BLOCK LETTERS)  
(\* INDICATES COMPULSORY FIELDS)

Send to: MRCC Cape Town

Fax: +27 (0)21 938 3309

Email: [mrcc.ct@samsa.org.za](mailto:mrcc.ct@samsa.org.za)

## EPIRB INFORMATION

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Beacon ID (Unique Identifier Number) \*

Cat 1 (Automatic / manual activation)

Cat 2 (Manual activation only)

How many other distress beacons are carried onboard? \_\_\_\_\_

EPIRB manufacturer \_\_\_\_\_

Model no. \_\_\_\_\_

Beacon unit serial no. \* \_\_\_\_\_

## EPIRB REGISTRATION

New EPIRB registration

Confirmation of previous EPIRB registration details

Change of EPIRB information or ownership

Tick here if this EPIRB has been previously registered

EPIRB's previous unique ID number  
\_\_\_\_\_

## OWNER / OPERATOR INFORMATION

Name \* \_\_\_\_\_

Postal address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_

Postal code \_\_\_\_\_ Country \_\_\_\_\_

E-mail \_\_\_\_\_

Telephone (include national and local code)<sup>1</sup>

( ) \_\_\_\_\_ \*  H  W  C  F  Other

( ) \_\_\_\_\_  H  W  C  F  Other

( ) \_\_\_\_\_  H  W  C  F  Other

( ) \_\_\_\_\_  H  W  C  F  Other

## EMERGENCY CONTACT INFORMATION (Please indicate someone other than the owner)

Name of **Primary** 24-hour emergency contact \*

Street address \_\_\_\_\_

Telephone (include national and local code)<sup>1</sup>

( ) \_\_\_\_\_ \*  H  W  C  F  Other

( ) \_\_\_\_\_  H  W  C  F  Other

( ) \_\_\_\_\_  H  W  C  F  Other

( ) \_\_\_\_\_  H  W  C  F  Other

Name of **Alternate** 24-hour emergency contact

Street address \_\_\_\_\_

Telephone (include national and local code)<sup>1</sup>

( ) \_\_\_\_\_  H  W  C  F  Other

( ) \_\_\_\_\_  H  W  C  F  Other

( ) \_\_\_\_\_  H  W  C  F  Other

( ) \_\_\_\_\_  H  W  C  F  Other

## VESSEL INFORMATION

Type \*

Sail: number of masts \_\_\_\_\_

Power:  Fishing  Tug  Cargo  Tanker  Pleasure craft

Other \_\_\_\_\_

Non-power:  Life boat  Life raft  Other \_\_\_\_\_

Vessel name \* \_\_\_\_\_

MMSI number \* \_\_\_\_\_

Call sign \* \_\_\_\_\_

Vessel registration number \* \_\_\_\_\_

Vessel colour \_\_\_\_\_

Length overall \_\_\_\_\_ m People capacity \_\_\_\_\_

Vessel contact numbers

INMARSAT \_\_\_\_\_

Cellular \_\_\_\_\_

Radio equipment

VHF  HF  MF  SSB  Other \_\_\_\_\_

Number of survival craft(s) on vessel: Life boat \_\_\_\_\_ Life raft \_\_\_\_\_

Home base \_\_\_\_\_

Additional useful data \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

<sup>1</sup> H = Home telephone – W = Work telephone – C = Cellular telephone – F = Facsimile number