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### SMALL COMMERCIAL VESSELS

## **OWNER'S INCIDENT REPORT**

# Please use this form to report any accidents, damage, structural or machinery/systems failure or any incident that could be relevant to the code certification.

## This does not remove any statutory obligation to report accidents to the Flag Administration

Name of Vessel	
MECAL Unique No.	
Location	
Date / Time of incident	

#### **Details:**

(please use continuation sheets, photos etc as applicable)

SIGNATURE	PRINT NAME	DATE



Certifying Authority authorised by the MCA

