ISSUED ON BEHALF OF THE DEPARTMENT OF SHIPPING GOVERNMENT OF THE PEOPLE'S REPUBLIC OF BANGLADESH

Form No:SMC



SL NO: 07-2022-1921

Taher Chamher

10, Agrabad C/A, Chittagong.

Name & Signature of the practitioner:

1820

SEAFARER MEDICAL CERTIFICATE

This certificate is issued in accordance with Bangladesh Merchant Shipping Ordinance, 1983 and Bangladesh Merchant Shipping Officers and Ratings Training, Certification, Recruitment, Work Hours and Watch keeping Rules, 2011 in compliance with the International Convention on Standards of Training Certificate and Watch keeping for Seafarers, 1978 as amended (STCW'78) and Regulation 1.2 of the Maritime Labour Convention, 2006

SEAFARER INFORMATION: Name: Last	MD	Middle SAIFUL
Date of Birth:(DD/MM/YYYY)	12-1987	
Gender: (Male/Female)	NUD No. AOO 3	51854
CDC No. C/@/7044 Seaman ID I	No: 05000	7783
Occupation: Deck/Engine/Catering/Other (spe	ecify)	1 5 K
Father's/ Husband's name:	WHUL AMI	
Mother's Name: SHAREIN Mailing address: House No-	A BEBUM. Street/Road No-	
Locality/Village: LEMCA.	PO LE	MUABAZAR
P.S. FENI SADAL District	FENI	

DECLARATION OF THE RECOGNIZED MEDICAL PRACTITIONER:

I am duly authorized by the Department of Shipping, Government of the People's Republic of Bangladesh and confirm the followings;

- 1. Confirmation that identification documents were checked at the point of examination: YES/NO
- 2. Hearing meets the standards in section A-I/9: YES/NO
- 3. Unaided hearing satisfactory?: YES/NO
- 4. Visual acuity meets standards in section A-I/9?: YES/NO
- Colour vision meets standards in section A-I/9?: YES/NO 5. Date of last colour vision test: 2 4 NOV 2022
- Fit for lookout duties?: YES/NO 6.

MD SAIFUL 1SLATZ

Seafarer's Signature

- 7. Is the seafarer free from any medical condition likely to be aggravated by service at sea or to render the seafarer unfit for service or to render the health of any other persons on board?: YES/NO
- 8. Any limitations or restrictions on fitness?: YES/NO^V If YES, specify limitations or restrictions

	Duties:	ſ	a			
	Location/Vessel:					
	Medical/Other					
			· .			
9.	Medical fitness category :	Fit-No restriction	Fit-subject to restric	tions	Unfit	
10. 11.	Date of examination/Issue (Date of expiry (DD/MM/YY)	DD/MM/YYYY) 2.4NOV ^(Y)	2022 	ars from the	date of exami	nation"
l have re	ead the contents of the certifica	te RAHMA		2M		
	e been informed of the right to	2030 014		TR. MD. AYUB M.B.B.S; P.G.	T (Medicine)	