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

Form No:SMC

I have read the contents of the certificate

Seafarer's Signature

and have been informed of the right to

review.



SLNO: 07-2022 - 1836

DR. M. AYUBUR RAHMAN

M.B.B.S; P.G.T (Medicine)

Taher Chamber

10. Agrabad C/A, Chittagong,
Regn. No. A-11820
Name & Signature of the practitioner:

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:	F40.111
Name: LastHOQVE First MUHAMMA! Date of Birth:(DD/MM/YYYY) 12-12-1984	D FA 2 LUL
Date of Birth:(DD/MM/VVVV) 12-12-1984	**************************************
Nationality BANG LADES HI Passport (NID No. BR	0301869
CDC No. C101 9870 Sooman ID No. 0.50	1001474
Nationality: BANG LADES HI. Passport/NID No. BR 0301869 CDC No. COL 9870 Seaman ID No. 050001474 Occupation: Deck/Engine/Catering/Other (specify). CHIEF ENGINEER	
Father's/ Husband's name: .M.U.H.A.M.MAD REZAUL HOQUE	
· · · · · · · · · · · · · · · · · · ·	
Mother's Name: HAMIDA KHANAM	1 -
Mailing address: House No- Street/Road N Locality/Village: ANWARA P.O. P.S. ANWARA District CHATTOG	10-ANWARA
Locality/Village: P.O. P.O. P.O. P.O. P.O. P.O. P.O. P.O	PAM
P.S. ANNAKA District CHAITOG	ANAMI
DECLARATION OF THE RECOGNIZED MEDICAL PRACTITIONER	
	sale But I But I But I But I adapt and confirm
I am duly authorized by the Department of Shipping, Govern	ment of the People's Republic of Bangladesh and confirm
the followings;	We had
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	
5. Colour vision meets standards in section A-I/9?: YES/NO	
Date of last colour vision test:	
6. Fit for lookout duties?: WES/NO 0 7 NOV 2022	
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	
If YES, specify limitations or restrictions	
Duties:	
Location/Vessel:	
Medical/Other	
Iviedical) Other	
9. Medical fitness category: Wit-No restriction	Fit-subject to restrictions Unfit
9. Medical fitness category: Wit-No restriction	Fit-subject to restrictions
10. Pete of examination (leave (PD (MMA (VVV))) 7. NOV. 2022	
10. Date of examination/Issue (DD/MM/YYYY)7	
22. 24.00.	
0 6 NOV 202	
	× X/I