



ХОРОШАЯ СТРАХОВАЯ КОМПАНИЯ

**CERTIFICATE OF INSURANCE OR OTHER FINANCIAL SECURITY
IN RESPECT OF SEAFARER REPATRIATION COST AND LIABILITIES AS REQUIRED
UNDER REGULATION 2.5.2. STANDARD A2.5.2 OF THE MARITIME LABOUR
CONVENTION 2006 AS AMENDED**

Name of Ship: " _____ "

Port of Registry: _____

Call sign: _____

IMO number of the ship: _____

The provider of insurance: JSC " Insurance Group " Hoska"

www.hoska.ru
8-800-555-8300 or +7(____) ____-__-__

Contact details of the person
for handling seafarers' request: _____

Name of the shipowner: _____

Period of validity of the Financial security: __th _____, 20__ to __th _____, 20__

THIS IS TO CERTIFY that there is in force a policy of insurance or other financial security in respect of the above-named ship while in the above ownership which meets the financial security requirements of Regulation 2.5.2 Standard A2.5.2 of the Maritime Labour Convention 2006 as Amended, where it is in force and applicable.

Provided always that the insurer or provider of financial security may cancel this Certificate in accordance with Standard A2.5.2.11 by giving at least 30 days written notice to the competent authority of the flag state whereupon the liability of the insurer hereunder shall cease as from the date of expiry of the said period of notice but only as regards events arising thereafter.

The policy of insurance is subject to certain condition and limitation details of which can be found on the insurer's website under " Marine Labour Convention Extension Clause 2016".

This certificate has been issued for and on behalf of the above-named provider of insurance or other financial security

Date: __th _____, 20__

Authorised Signatory: _____/