

MEDICAL CERTIFICATE FOR SEAFARERS

approved and authorized by the Swiss Maritime Navigation Office SMNO, Flag State Authority of Switzerland

Issued in compliance with STCW Convention 1978, as amended 2010, Section A-1/9 Paragraph 7
 and the Maritime Labour Convention, 2006

Certificate Number:	MC-2024-0000
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Seafarer information

Name: (Last, first, middle)	Mustermann, Peter	
Date of birth: (day/month/year)	01/01/1969	
Gender:	Male <input checked="" type="checkbox"/>	Female <input type="checkbox"/>
Nationality:	Swiss	
Passport Number:	X000000	
Seaman's Book Number:	n/a	

Declaration of the recognized medical practitioner

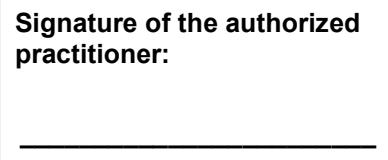
Confirmation that identification documents were checked at the point of examination:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Hearing meets the standards in STCW Code Section A-I/9?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Unaided hearing satisfactory?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Visual acuity meets standards in STCW Code Section A-I/9?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Colour vision meets standards in STCW Code Section A-I/9?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Date of last colour vision test: (day/month/year)	01/11/2022	
Fit for look-out duties?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Fit for duty as Master / Deck Officer / Radio Operator / Deck Rating Fit for duty as Chief Engineer / Engineering Officer / Engine Rating Fit for duty as catering service / other services	Yes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/>
No limitations or restrictions on fitness?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If "No", specify limitations or restrictions.	visual aid for defective distant and near vision required	
Is the seafarer free from any medical condition likely to be aggravated by service at sea or to render the seafarer unfit for such service or to endanger the health of other persons on board?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Date of examination: (day/month/year)	31/10/2024	
Expiry date of certificate: (day/month/year)	31/10/2026	

Official stamp of the issuing authority

azb ag

Güterstrasse 107
 CH-4133 Pratteln
 Switzerland
 Phone: +41 61 821 82 60
 E-Mail: info@azbasel.com
 Internet: www.azbasel.com

Signature of the authorized practitioner:



Seafarer's signature:

confirming that the seafarer has been informed of the content of the certificate and of the right to a review in accordance with paragraph 6 of STCW Code Section A-I/9

