



# PANAMA MARITIME AUTHORITY

## TECHNICAL OFFICE – SEGUMAR PANAMA

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TO: SHIP OWNERS, OPERATORS.

FROM: PANAMA MARITIME AUTHORITY – Technical Office – Segumar Panama

SUBJ: **APPLICATION FOR EXTENSION OF BREATHING APPARATUS (SCBA 5-YEARLY INSPECTION)**

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In order to process your request on **SCBA INSPECTION EXTENSION**, please be informed that we need to be provided with the following information:

- **Copy of the Registration of Navigation (Panama Merchant Registry – Patente)**. ← if it's required
- **Copy of the Cargo Ship Safety Equipment Certificate and Record**. ←
- **Copy of the last Service Certificate for all the SCBA Inspection**. ←

### PARTICULARS

NAME OF THE SHIP:		_____		
DISTINCTIVE NUMBER OR LETTERS:		_____		
IMO No.:		_____		
CLASS SOCIETY NAME :		_____		
NAME OF OWNER AND E-MAIL:		_____		
NUMBERS (CYLINDERS QUANTITY):	<u>DECK</u>	<u>ENGINE</u>	<u>ADDITIONAL SCBA</u>	
	_____	_____	_____	
SERIAL No.(s):	_____	_____	_____	
TYPE:	_____	_____	_____	
EQUIPMENT MANUFACTURER:	_____	_____	_____	
CAPACITY OF CYLINDER:	_____	_____	_____	
LAST DATE OF SERVICE: (mm/dd/yy)	_____	_____	_____	
PERIOD OF EXTENSION:	_____	_____	_____	
NAME OF APPLICANT:		_____		
ADDRESS:		_____		
TEL:	_____	FAX:	_____	