

Stowaway Incident Declaration Form for Border Control Authorities

Vessel & Voyage Information

Vessel Name

IMO Number

Flag State

Voyage Number

Last Port of Call

Date of Arrival

Incident Details

Date Stowaway Found

Location Found Onboard

Circumstances of Discovery

Stowaway Information

Name

Gender

Date of Birth / Age (if known)

Date of Birth / Age (if known)

Nationality (if known)

Languages Spoken

Identification Documents (if any)

Additional Remarks

Reporting Officer

Name

Position

Contact Details

Date of Report