

ISPS Code Security Threat Assessment Form

Vessel Name

IMO Number

Date

Port/Location

Master/SSO Name

Rank/Title

Time

Assessment Reference No.

Threat Description / Source of Threat

Type of Security Threat (Tick as applicable)

	Threat
<input type="checkbox"/>	Piracy/Armed Robbery
<input type="checkbox"/>	Bomb Threat
<input type="checkbox"/>	Stowaways
<input type="checkbox"/>	Smuggling
<input type="checkbox"/>	Suspicious Surveillance
<input type="checkbox"/>	Weapons/Explosives
<input type="checkbox"/>	Unauthorised Access/Intrusion
<input type="checkbox"/>	Other (specify)

Details of Security Threat Assessment

Mitigation Measures/Actions Taken

Security Level Set

Reported To

Signature (SSO/Master)

Date