



**UNITED ALLIANCE GROUP LTD**

**AZERBAIJAN BRANCH**



## APPLICATION FORM

1

<b>Position</b>	<b>identity card PIN Number 0YWZLBZ</b>
<b>Position Applied for:</b>	Able Seafarer Deck
<b>Date Available from:</b>	-

2

<b>Personal Information</b>		<b>Gender: Male</b>
<b>First Name: ELCHIN</b>	<b>Last Name: ZIYADOV</b>	
Date of Birth: 01.12.1980	Place of Birth (City and Country): Azerbaijan, ASTARA	
Email: elchinziyadov80@mail.ru	Mobile Number: (+994) 50 345 30 49	
Permanent Address: Siyaku village , Astara district, Azerbaijan	Expected Salary Per Month: -	
Nationality: Azerbaijan	Alternative rank applying for: -	
<b>Person to call in emergency: (+994) 50 571 57 87 Brother</b>		

3

<b>Family Details: (If Unmarried kindly give details of Father / Mother)</b>				
<b>First Name</b>	<b>Last Name</b>	<b>Gender</b>	<b>Relation</b>	<b>Contact</b>
Zamik	Ziyadov	Male	Brother	+994 50 571 57 87

4

<b>Maritime Education</b>				
<b>Name of school</b>	<b>Country</b>	<b>From</b>	<b>To</b>	<b>Type of degree or diploma</b>
6 numbered labor college	Azerbaijan	2008	2009	College

5

<b>Physical Data</b>	
Height	<b>180</b>
Weight	90
Boilersuit Size	XL
Shoes Size	44
Blood group	A(II)RH+
Additional Physical Information:{You can write any other information you want to add about your physique in this field.}	

6

<b>Seaman`s Book &amp; Identify Docs</b>					
<b>DOCUMENT</b>	<b>COUNTRY</b>	<b>NUMBER</b>	<b>DATE OF ISSUE</b>	<b>PLACE OF ISSUE</b>	<b>DATE OF EXPIRY</b>
Ship Management ISM&ISPS Management Ship Agency Consultations Provision, Ship Supply					
Yacht Management Technical Management Ship Brokering Surveying & Monitoring New Building & Repair					
Sale & Purchasing Ship Agency Exclusive Cargo Brokering Bunker Supply Technical Services					

**Address:** AZ1075, Azerbaijan, Baku,Yusif Vazir Chemenzemenli 119c,Afen Plaza Business Center 5nd floor,apt 13 **Email:** crewing@unitedalliancegroup.com **Tel:** +994 51 277 19 31

Seaman Book	Azerbaijan	DQK 019654		06.04.2022	Azerbaijan		06.04.2027
Certificate of Competency	Azerbaijan	RP06117		05.03.2023	Azerbaijan		-
Republic of Azerbaijan	Azerbaijan	C01423049		14.12.2016	Azerbaijan		13.12.2026
Republic of Liberia	Liberia	1848807		29.09.2023	Liberia		29.09.2028
Do you hold a US Visa 'C1/D'?		YES/NO	NO	Issue Date:	-	Expiry Date: -	
Do you hold a US Visa 'B1/B2'?		YES/NO	NO	Issue Date:	-	Expiry Date:-	
Have you been rejected for any visa applied for?				YES/NO	NO		
If YES, please state the country and reasons				-			

7

**Professional Test**

Professional Test Date	Name of Test	Score
-	-	-

8

**License**

Name	Issuing Country	Certificate Number	Valid Until
National endorsement of certificate of competency (if issued)	-	-	-
Flag State Endorsements	-	-	-

9

**STCW Certificates & Trainings**

Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry
PERSONAL SURVIVAL TECHNIQS	Azerbaijan	SO-0558-22	UAG	10.02.2022	04.02.2027
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-0558-22	UAG	10.02.2022	04.02.2027
ELEMENTARY FIRST AID	Azerbaijan	SO-0558-22	UAG	10.02.2022	04.02.2027
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-0558-22	UAG	10.02.2022	04.02.2027
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-0558-22	UAG	10.02.2022	04.02.2027
International Safety Management	Azerbaijan	SP-0345-22	UAG	09.02.2022	31.01.2027
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-0328-22	UAG	14.02.2022	28.01.2027
Security Awareness Training For All Seafarers	Azerbaijan	SI-1477-23	UAG	24.05.2023	24.05.2028
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-0411-20	UAG	04.09.2020	18.08.2025
Basic training and qualifications on oil and chemical tanker cargo operations;	Azerbaijan	SA-0376-23	UAG	17.05.2023	17.05.2028

Ship Management  
ISM&ISPS Management  
Ship Agency  
Consultations  
Provision, Ship Supply

Yacht Management  
Technical Management  
Ship Brokering  
Surveying & Monitoring  
New Building & Repair

Sale & Purchasing  
Ship Agency  
Exclusive Cargo Brokering  
Bunker Supply  
Technical Services

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## Seagoing Experience

(Please give a full record starting with the last vessel on which you served)

COMPANY	Name of vessel	Flag	Vessel's Type	DWT	Eng Type	GRT	TEU	Rank	From m/d/y	To m/d/y	Total m/d	REASONS FOR S/OFF
PALMALI SHIPPING	AHMED MAHMUDOV	Malta	General Cargo	6970	Wartsila	6271	-	A/B	20.09.2012	11.05.2013	8 month	End of Contract
PALMALI SHIPPING	AHMED MAHMUDOV	Malta	General Cargo	6970	Wartsila	6271	-	A/B	16.10.2013	05.04.2014	6 month	End of Contract
PALMALI SHIPPING	PALMALI VOYAGER	Malta	General Cargo	6970	Wartsila	5684	-	A/B	15.03.2016	20.10.2016	7 month	End of Contract
PALMALI SHIPPING	ILYAS EFENDIYEV	Malta	General Cargo	6933	Wartsila	5684	-	A/B	05.04.2017	19.10.2017	6 month	End of Contract
PALMALI SHIPPING	CAPTAIN NAGDALIEV	Malta	Chemical Tanker	7103	Wartsila	4684	-	A/B	02.03.2018	17.09.2018	6 month	End of Contract
ARROW STAR ISTANBUL	ARROW STAR	Malta	Oil Tanker	13030	Wartsila	7833	-	A/B	14.05.2019	27.10.2019	5 month	End of Contract
ARROW STAR ISTANBUL	ARROW STAR	Malta	Oil Tanker	13030	Wartsila	7833	-	A/B	20.05.2022	09.02.2023	9 month	End of Contract
LUNA MARINE LIMITED	LUNA	Liberia	Tanker	13470	Man	7848	-	A/B	20.09.2023	02.11.2023	2 month	End of Contract

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11

**For Engineers (Please provide details)**

Generators	-
Purifiers and Boilers	-
Type of Cranes / No of Reefer Containers	-

12

**Other Experience**

-

12

**Travel Documents**

Name	YES/NO	Country	Date pf Expire
Schengen	YES/NO	NO	-
US	YES/NO	NO	-
China	YES/NO	NO	-
Australia	YES/NO	NO	-

13

**Insurance ,Health Related Documentation**

Medical Certificate (Fit for Duty)	YES/NO	YES
<b>Vaccination</b>		
Yellow Fever	YES/NO	NO
COVID-19	YES/NO	YES

(If the answer is YES to any of the above, please give full details and attach a separate page if necessary)

14

**Medical history**

Have you ever signed off a ship due to medical reasons?	YES/NO	NO
Have you undergone any operation in the past?	YES/NO	NO
Have you consulted a doctor during the last 12 months for an illness/accident?	YES/NO	NO
Do you have any health or disability problems now?	YES/NO	NO
Do you take any medications regularly?	YES/NO	NO

(If the answer is YES to any of the above, please give full details and attach a separate page if necessary)

15

**General**

Have you ever been the subject of a court of enquiry or involved in a maritime accident?	YES/NO	NO
Have you ever had a professional license suspended or revoked?	YES/NO	NO

(If YES, please give full details and attach a separate page if necessary)

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16

**References** (Please give the name and address of your current or immediate past employer)

Name of company	1.-	2.-
Name of person to contact	-	-
Address	-	-
☎ No.	-	-

17

**Declaration**

I hereby declare that the above particulars are true and authorize you to contact the referees listed above.

I have read it, I am familiar with it, I confirm with my signature.



Signature

Date: 19.02.2024

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