



UNITED ALLIANCE GROUP LTD

AZERBAIJAN BRANCH



APPLICATION FORM

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Position	identity card PIN Number 0Y3GYQ1
Position Applied for:	Chief Engineer
Date Available from:	-

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Personal Information		Gender: Male
First Name: ELCHIN	Last Name: MAMMADOV	
Date of Birth: 29.12.1968	Place of Birth (City and Country): Azerbaijan, BAKU	
Email:	Mobile Number: (+994) 50 345 26 14	
Permanent Address: Chingizkhan Karimov street , Khatai district, Baku, Azerbaijan	Expected Salary Per Month: -	
Nationality: Azerbaijan	Alternative rank applying for: -	
Person to call in emergency: (+994) 50981 07 90 Son		

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Family Details: (If Unmarried kindly give details of Father / Mother)				
First Name	Last Name	Gender	Relation	Contact
Elvin	Mammadov	Male	Son	+994 50 981 07 90

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Maritime Education				
Name of school	Country	From	To	Type of degree or diploma
Azerbaijan State Marine Academy	Azerbaijan	1996	2000	Bachelor

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Physical Data	
Height	176
Weight	92
Boilersuit Size	2XL
Shoes Size	42
Blood group	AB(IV)RH+
Additional Physical Information:{You can write any other information you want to add about your physique in this field.}	

Ship Management
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Surveying & Monitoring
New Building & Repair

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

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

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Seaman`s Book & Identify Docs

DOCUMENT	COUNTRY	NUMBER		DATE OF ISSUE	PLACE OF ISSUE		DATE OF EXPIRY
Seaman Book	Azerbaijan	DQK 023109		29.03.2023	Azerbaijan		29.03.2028
Certificate of Competency	Azerbaijan	0001739		06.03.2020	Azerbaijan		03.03.2025
Republic of Azerbaijan	Azerbaijan	C02355379		31.05.2019	Azerbaijan		30.05.2029
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				-			

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Professional Test

Professional Test Date	Name of Test	Score
-	-	-

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License

Name	Issuing Country	Certificate Number	Valid Until
National endorsement of certificate of competency (if issued)	Malta	33893	0303.2025
Flag State Endorsements	-	-	-

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STCW Certificates & Trainings

Courses	Issued Country	Certificate No.	Training Center	Date Issued	Date Of Expiry
PERSONAL SURVIVAL TECHNIQS	Azerbaijan	SO-0577-21	SMPA	12.04.2021	12.04.2026
FIRE PREVENTION & FIRE FIGHTING	Azerbaijan	SO-0577-21	SMPA	12.04.2021	12.04.2026
ELEMENTARY FIRST AID	Azerbaijan	SO-0577-21	SMPA	12.04.2021	12.04.2026
PERSONAL SAFETY & SOCIAL RESPONSIBILITY	Azerbaijan	SO-0577-21	SMPA	12.04.2021	12.04.2026
SAFETY FAMILIARIZATION TRAINING	Azerbaijan	SO-0577-21	SMPA	12.04.2021	12.04.2026
International Safety Management	Azerbaijan	SP-	SMPA		
Proficiency in Survival Craft & Rescue Boats	Azerbaijan	SL-0433-21	SMPA	09.04.2021	09.04.2026
Security Awareness Training For All Seafarers	Azerbaijan	SI-1850-22	SMPA	28.07.2022	21.06.2027
Security Training For Seafarers With Designated Security Duties	Azerbaijan	SH-1437-22	SMPA	27.07.2022	22.06.2027
Updating	Azerbaijan	XS-0045-20	SMPA	03.03.2020	03.03.2025
Leadership & Teamwork	Azerbaijan	DL-0003-22	SMPA	05.01.2022	08.12.2026
Advanced Training in Fire Fighting	Azerbaijan	SJ-0249-21	SMPA	02.04.2021	02.04.2026
Basic training and qualifications on oil and chemical tanker cargo operations;	Azerbaijan	SA-0083-21	SMPA	06.04.2021	26.02.2026
Advanced training for oil tanker cargo operations (Crude oil washing system)	Azerbaijan	SB-0041-21	SMPA	18.03.2021	24.02.2026
Advanced training for Chemical tanker cargo operations; (STCW Code section A-V/1-1, table A-V/1-1-3)	Azerbaijan	AS-0015-22	SMPA	08.02.2022	08.02.2027
Medical First Aid	Azerbaijan	SN-0175-20	SMPA	03.03.2020	03.03.2025
Medical Care	Azerbaijan	SM-0046-20	SMPA	04.03.2020	04.03.2025
1000 voltage	Azerbaijan	DM-0176-22	SMPA	28.07.2022	21.07.2027
Eugenie-room resource management	Azerbaijan	ER-0056-20	SMPA	24.02.2020	24.02.2025

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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	M/V KHANKENDI	Malta	Chemical Tanker	14374	-	8995	-	Chief Engineer	05.01.2018	10.07.2018	6 months	End of Contract
PALMALI SHIPPING	M/V PALCHEM 1	Malta	Chemical /Oil Products Tanker	14368	-	8995	-	Chief Engineer	09.02.2019	15.08.2019	6 months	End of Contract
PALMALI SHIPPING	M/V BALTIC MARINER	Liberia	Refrigerated Cargo Ship	9852	-	10424	-	Chief Engineer	10.03.2020	23.09.2020	6 months	End of Contract
ARROWSTAR SHIPPING	M/V ARROWSTAR 1	Malta	Oil Products Tanker	13030	-	7833	-	Chief Engineer	05.04.2021	14.10.2021	6 months	End of Contract
ARROWSTAR SHIPPING	M/V ARROWSTAR 1	Malta	Oil Products Tanker	13030	-	7833	-	Chief Engineer	11.05.2022	23.11.2022	6 months	End of Contract
KOLIN9	M/V UNIC TANKER	Turkish	Oil Products Tanker	7000	-	-	-	Chief Engineer	23.02.2023	14.06.2023	4 months	End of Contract
BLACK SEA	M/V IMZA MARINE	Malta	Oil Products Tanker	7000	-	-	-	Chief Engineer	18.08.2023	25.12.2023	4 months	End of Contract

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For Engineers (Please provide details)

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

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Other Experience

Russian Language : Excellent
Azerbaijan Language : Excellent

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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	-

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Insurance ,Health Related Documentation

Medical Certificate (Fit for Duty)	YES/NO	YES
Vaccination		
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)

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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)

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

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

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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: 19.08.2024

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