



APPLICATION FORM

1	Position	identity card PIN Number 1AX31ZU
	Position Applied for:	Electro Technical Officer
	Date Available from:	-

Personal Information	Gender: Male				
First Name: VUGAR	Last Name: HEYBATOV				
Date of Birth: 07.07.1985	Place of Birth (City and Country): Azerbaijan, SUMGAYIT				
Email:heybetovvuqar69@gmail.com	Mobile Number: (+994) 55 923 63 30				
Permanent Address: 6 mkr, Sumgait city, Azerbaijan	Expected Salary Per Month: -				
Nationality: Azerbaijan	Alternative rank applying for:-				
Person to call in emergency: (+994) 50 565 10 63 Father					

3	Family Details: (If Unmarried kindly give details of Father / Mother)									
	First Name	Last Name	Gender	Relation	Contact					
	Abid	Hebyatov	Male	Father	+994505651063					

4	Maritime Education									
	Name of school	Country	From	То	Type of degree or diploma					
	Azerbaijan State Marine Academy	Azerbaijan	2003	2007	Bachelor					

Physical Data	
Height	170
Weight	86
Boilersuit Size	L
Shoes Size	42
Blood group	B(III)RH+

6	Seaman's Book & Id	entify Docs				
	DOCUMENT	COUNTRY	NUMBER	DATE OF ISSUE	PLACE OF ISSUE	DATE OF EXPIRY

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Yacht Management Technical Management Ship Brokering Surveying & Monitoring New Building & Repair Sale & Purchasing Ship Agency Exclusive Cargo Brokering Bunker Supply Technical Services

Seaman Book	Seaman Book Azerbaijan		028842	09.07.2024	Aze	rbaijan	09.07.2029
Certificate of Competency	Azerbaijan	0005246		13.06.2024	Aze	rbaijan	13.06.2029
Republic of Azerbaijan	Azerbaijan	C03	029736	31.01.2020	Azerbaijan		31.01.2030
Do you hold a US Vis	Do you hold a US Visa 'C1/D'?			Issue Date:	-	Expiry	Date: -
Do you hold a US Vis	YES/NO NO		Issue Date:	- Expiry		Date:-	
Have you been rejecte	YES/NO	NO					
If YES, please state the	-						

7 Professional Test

Professional Test Date	Name of Test	Score
-	-	-

8 License

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

STCW Certificates & Trainings Training Date Of **Issued Country** Certificate No. **Date Issued** Courses Center **Expiry** PERSONAL SURVIVAL TECHNICS Azerbaijan SO-3242-22 SMPA 19.07.2022 18.07.2027 FIRE PREVENTION & FIRE FIGHTING Azerbaijan SO-3242-22 **SMPA** 19.07.2022 18.07.2027 **SMPA** 19.07.2022 **ELEMENTARY FIRST AID** Azerbaijan SO-3242-22 18.07.2027 19.07.2022 PERSONAL SAFETY & SOCIAL RESPONSIBILITY Azerbaijan SO-3242-22 **SMPA** 18.07.2027 SO-3242-22 SAFETY FAMILIARIZATION TRAINING **SMPA** 19.07.2022 18.07.2027 Azerbaijan **International Safety Management** Azerbaijan SP-0820-23 **SMPA** 09.03.2023 03.03.2028 Proficiency in Survival Craft & Rescue **SMPA** 13.02.2028 SL-0536-23 13.02.2023 Azerbaijan **Boats** Security Awareness Training For All SI-1293-24 SMPA 05.04.2024 Unlimited Azerbaijan Seafarers Security Training For Seafarers With SH-0426-24 SMPA 01.03.2024 Unlimited Azerbaijan **Designated Security Duties** Advanced Training in Fire Fighting Azerbaijan SJ-0326-23 **SMPA** 10.03.2023 09.02.2028 **SMPA** 10.03.2028 Medical First Aid Azerbaijan SN-0415-23 10.03.2023

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Address: AZI075, Azerbaijan, Baku, Yusif Vazir Chemenzemenli 119c, Afen Plaza Business Center 5nd floor, apt 13 Email: crewing@unitedalliancegroup.com Tel: +994 51 277 19 31

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
TURAN SHIPPING LTD	M/V MEHMET SEFA	Turkey	General Cargo Ship	3007	Cummins	1998		ETO	-	02.01.2010	-	End of Contract
CASPIAN B.ACCIDENT RECIVE SERVICE	M/V SVETLOMOR-2	Azerbaijan	Offshore Tug/Sup ply Ship	1000	Wartsila	1695	C_{E}	ETO	04.05.2012	21.08.2012	3 months 17 days	End of Contract
CASPIAN B.ACCIDENT RECIVE SERVICE	M/V SVETLOMOR-2	Azerbaijan	Offshore Tug/Sup ply Ship	1000	Wartsila	1695		ETO	02.04.2013	10.07.2013	3 months 8 days	End of Contract
CASPIAN B.ACCIDENT RECIVE SERVICE	M/V SVETLOMOR-2	Azerbaijan	Offshore Tug/Sup ply Ship	1000	Wartsila	1695	4	ETO	03.03.2014	22.06.2014	3 months 19 days	End of Contract
CASPIAN B.ACCIDENT RECIVE SERVICE	M/V SVETLOMOR-2	Azerbaijan	Offshore Tug/Sup ply Ship	1000	Wartsila	1695		ETO	06.07.2015	19.11.2015	4 months 13 days	End of Contract
CASPIAN B.ACCIDENT RECIVE SERVICE	M/V SVETLOMOR-2	Azerbaijan	Offshore Tug/Sup ply Ship	1000	Wartsila	1695	-	ETO	27.05.2016	05.09.2016	3 months 9 days	End of Contract
CASPIAN B.ACCIDENT RECIVE SERVICE	M/V SVETLOMOR-2	Azerbaijan	Offshore Tug/Sup ply Ship	1000	Wartsila	1695		ETO	01.01.2017	10.04.2017	3 months 9 days	End of Contract
SAMAYA CO LTD LLC	M/V BAKI-357	Azerbaijan	ОВО	2615	Russian Diesel	3280	-	ETO	01.05.2017	-	-	End of Contract

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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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11	For Engineers	(Please provide details)	ide details)		
<u>_</u>		-			
	Congrators				

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

Other Experience

Azerbaijan Language: Native English Language; Average Russian Language: Good Turkish Language: Good

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
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)

Medical history

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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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16	References (Please give the I	name and address of your current or immediate pa	ast employer)
	Name of company	1	2

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: 21.02.2025

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