

CURRICULUM VITAE			Date Available	IMMEDIATELY
Name	DIMGBA FESTUS CHINEDU		Rank	2ND/3RD ENGINEER
Date of Birth	02/Jan/1989		Place of Birth	Aba
Marital Status	Married		Nationality	Nigerian
Religion	Christianity		Blood Grp/Genotype	O+/AS
E-mail	dimgba.engr@gmail.com		Coverall/Shoe size	Medium/42
Mobile & WhatsApp	+2348067873861		Hieght/Weight	168cm/60kg
Home Address	17 New Cross Hospital Road Owerri, Imo State, Nigeria.			
NEXT OF KIN				
Name	DIMGBA CELESTINA		Relationship	Mother
Address	Plot 116 Byazhin Road Kubwa Abuja, FCT Nigeria			
Mobile	+2348030831520			
TRAVELLING DOCUMENT	NUMBER	DATE OF ISSUE	DATE OF EXPIRY	PLACE OF ISSUE
Passport	A11950072	21/06/2021	27/06/2026	Warri
Seaman Book	NIG 031908	22/07/2011		Portharcourt
CERTIFICATE OF COMPETENCY		CAPACITY	DATE OF ISSUE	DATE OF EXPIRY
OFFICER In CHARGE OF ENGINEERING WATCH		UNLIMITED	30/03/2022	29/03/2027
	STCW TRAINING Certificates & VACCINES		DATE OF ISSUE	DATE OF EXPIRY
	HUET (OPITO Standard)		17/04/2023	16/04/2027
	Advance Fire Fighting		18/02/2022	17/02/2027
	Marlins Certificate		23/07/2023	23/07/2027
	Basic Training for Oil and Chemical Tanker Operation		22/05/2024	22/05/2029
	Medical First Aid		28/01/2022	28/01/2027
	Seafarer Medical Certificate		31/01/2024	30/01/2026
	Proficiency in Survival Craft and Rescue Boats		19/02/2021	18/02/2026
	Human Element, Leadership and Management		20/07/2022	20/07/2027
	Engine Room Resource Management		15/07/2022	15/07/2027
	Basic Safety Training		24/05/2024	24/05/2029
	Basic H2S Training		15/07/2023	
	Ship Security Officer		22/02/2022	
	International Safety Management (ISM Code)		01/03/2022	
	Security Awareness & Designated Security Duties		15/05/2015	
	Covid-19 Vaccine DOSE 1		26/03/2021	
	Covid-19 Vaccine DOSE 2		26/06/2021	
	Covid-19 Booster Dose		05/10/2023	
	Yellow Fever		20/07/2022	
	NIMASA Seafarer Registration Status		14/09/2023	

**SEA EXPERIENCE (date from earliest to latest)**

NAME OF VESSEL	RANK	ENGINE / VESSEL TYPE	GRT/HP	COMPANY	PERIOD ONBOARD		Days Onboard
					FROM	TO	
BUDDHA 4	2nd Engr	CAT 3516B / AHTS DP1	1373/5150	DFSL	15/08/2024	11/04/2025	239
HADASSAH T1	3rd Engr	MAK 6M25 /AHTS	1333/4958	DMSL	30/05/2024	02/08/2024	64
HADASSAH T2	3rd Engr	Yanmar 6N280M /AHTS	1333/5092	DMSL	03/02/2024	10/05/2024	97
HADASSAH T1	3rd Engr	MAK 6M25 / AHTS	1333/4958	DMSL	07/10/2023	06/01/2024	91
HADASSAH T2	3rd Engr	Yanmar 6N280M/ AHTS	1333/5092	DMSL	27/05/2023	07/09/2023	103
HADASSAH T1	3rd Engr	MAK 6M25 / AHTS	1333/4958	DMSL	03/12/2022	12/04/2023	130
HADASSAH T2	3rd Engr	Yanmar 6N280M/ AHTS	1333/5092	DMSL	18/09/2022	23/11/2022	66
HADASSAH T1	Oiler	MAK 6M25 / AHTS	1333/4958	DMSL	30/03/2022	08/07/2022	100
HADASSAH T1	Oiler	MAK 6M25 / AHTS	1333/4958	DMSL	16/06/2021	20/08/2021	63
HADASSAH T2	Engr.Cadet	Yanmar 6N280M/ AHTS	1333/5092	DMSL	15/03/2021	13/05/2021	59
HADASSAH T2	Engr.Cadet	Yanmar 6N280M/ AHTS	1333/5092	DMSL	22/10/2020	15/01/2021	85
HADASSAH T2	Engr.Cadet	Yanmar 6N280M/ AHTS	1333/5092	DMSL	20/06/2020	29/08/2020	70
HADASSAH T2	Engr.Cadet	Yanmar 6N280M/ AHTS	1333/5092	DMSL	26/01/2020	20/04/2020	94
HADASSAH T2	Engr.Cadet	Yanmar 6N280M/ AHTS	1333/5092	DMSL	21/09/2019	28/11/2019	68
HADASSAH T1	Engr.Cadet	MAK 6M25 / AHTS	1333/4958	DMSL	27/06/2019	30/08/2019	64
HADASSAH T2	Engr.Cadet	Yanmar 6N280M/ AHTS	1333/5092	DMSL	21/03/2019	26/05/2019	66
HADASSAH T1	Engr.Cadet	MAK 6M25 / AHTS	1333/4958	DMSL	21/12/2018	21/02/2019	62
HADASSAH T2	Engr.Cadet	Yanmar 6N280M/ AHTS	1333/5092	DMSL	13/09/2018	15/11/2018	63
HADASSAH T1	Engr.Cadet	MAK 6M25 / AHTS	1333/4958	DMSL	10/06/2018	17/08/2018	68
HADASSAH T1	Engr.Cadet	MAK 6M25 / AHTS	1333/4958	DMSL	25/02/2018	12/05/2018	76
MDPL RANDA	Oiler	CUMMINS / PSV	975/1025	AOL	08/05/2016	10/11/2016	186
MDPL RANDA	Oiler	CUMMINS/ PSV	975/1025	AOL	07/08/2015	20/01/2016	166
ALEXANDRA MORONI	Engr.Cadet	WARTSILA/Oil Tanker	1164/2314	AOL	09/09/2012	13/06/2013	277
ALEXANDRA MORONI	Engr.Cadet	WARTSILA/Oil Tanker	1164/2314	AOL	18/09/2011	24/08/2012	341

DFSL - DEEP FRONTLINE SHIPPERS LIMITED  
DMSL - DELTATEK MARINE SERVICES LIMITED  
AOL - ANGUS OFFSHORE LIMITED

## NOTES

1. The original of this certificate must be kept available in accordance with Regulation 1/4 of the STCW Convention while serving on a ship.
2. Attention is drawn to provisions of the law whereby fraudulent use, forgery or alteration of this document could constitute a criminal offence.
3. Any person finding this document should send it to:  
Director  
Maritime Safety & Seafarers Standards  
NIMASA  
4 Burma Road, Apapa, Lagos, Nigeria.  
Postage will be paid by the addressee.
4. The validity of this certificate can be checked during office hours by contacting the Director, Maritime Safety & Seafarers Standards, MIMASA, 4 Burma Road, Apapa, Lagos, Nigeria.

Tel: 01-2713627  
01-2121190

Email: [msssd@nimasa.gov.ng](mailto:msssd@nimasa.gov.ng)

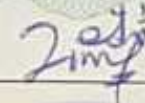
## PARTICULARS OF HOLDER OF THE CERTIFICATE

NAME: **DIMGBA FESTUS CHINEDU**

PLACE OF BIRTH: **ABA**

DATE OF BIRTH: **02-JAN-1989**

SIGNATURE OF HOLDER  
OF THE CERTIFICATE:



007705





**MERCHANT SHIPPING ACT**

**MERCHANT SHIPPING  
(TRAINING AND CERTIFICATION OF SEAFARERS)  
REGULATION 2008**

**CERTIFICATE OF COMPETENCY**

No. **007705**

This certificate, as enclosed herein, has been issued to:

**DIMGBA FESTUS CHINEDU**

who is entitled under the Merchant Shipping Act to serve in the capacity of:

**Officer in charge of Engineering Watch**

in a Merchant Motorship requiring a certificate of competency of that class in accordance with the above Regulation.

This certificate is subject to appropriate validity or endorsement contain herein as to its limitations, exclusions, or additional qualifications.

SIGNATURE OF DULY AUTHORISED OFFICIAL

**DR. BASHIR JAMOH**

NAME OF DULY AUTHORISED OFFICIAL

**CERTIFICATE ISSUED UNDER THE PROVISIONS OF THE  
INTERNATIONAL CONVENTION ON STANDARDS OF TRAINING,  
CERTIFICATION, AND WATCHKEEPING FOR SEAFARERS 1978,  
AS AMENDED**

CERTIFICATE No. **007705**

The Government of Federal Republic of Nigeria certifies that:

**DIMGBA FESTUS CHINEDU**

has been found duly qualified in accordance with the provisions of  
Regulation **III/1** of the above Convention,

as amended, and has been found competent to perform the functions,  
at the level specified overleaf, subject to any limitations indicated until  
**29-MAR-2027** or until the date of expiry of any

extension of the validity of the certificate as may be shown on page 6.

ISSUED ON **30-MAR-2022**

SIGNATURE OF DULY AUTHORISED OFFICIAL

**DR. BASHIR JAMOH**

NAME OF DULY AUTHORISED OFFICIAL



FUNCTIONS *	LEVEL *	LIMITATIONS APPLYING * (IF ANY) <small>Not valid for service on tankers at management level unless endorsed on page 12</small>
3	O	UNLIMITED
4	O	
5	O	
6	O	

\* See page 13

The lawful holder of this certificate may serve in the following capacity or the capacities specified in the safe manning regulations.

CAPACITY	LIMITATIONS APPLYING (IF ANY)
OOW	UNLIMITED

## ENDORSEMENT



### ENDORSEMENT ATTESTING THE RECOGNITION OF A CERTIFICATE OF COMPETENCY ISSUED UNDER THE PROVISIONS OF THE INTERNATIONAL CONVENTION ON STANDARDS OF TRAINING, CERTIFICATION, AND WATCHKEEPING FOR SEAFARERS, 1978, AS AMENDED

The Government of \_\_\_\_\_ Certifies that this

Certificate No. \_\_\_\_\_ issued to

by or on behalf of the Government of \_\_\_\_\_ is duly recognised in accordance with the provisions of regulation 1/10 of the above Convention, as amended, and the lawful holder is authorised to perform the following functions at the levels specified on page 4, subject to any limitations indicated, until \_\_\_\_\_ or until the date of expiry of any extension of the validity of this endorsement as may be shown on page 6.

ISSUED ON \_\_\_\_\_

SIGNATURE OF DULY AUTHORISED OFFICIAL

NAME OF DULY AUTHORISED OFFICIAL







## DECLARATION

I DECLARE:

- (i) that the person to whom this Discharge Book relates has Satisfied me that he (she) is a seaman; and  
 (ii) that the photograph affixed bearing my official stamp is a true likeness of that person, that the signature within is his (her) true signature, that he (she) possesses the physical characteristics entered within and has stated to me the date and Place of his (her) birth as entered within.



Shipping Masters Embossing Stamp

*[Signature]*  
 Signature of the Authorised Officer

*Emmanuel S. A.*  
 Name/Designation

Date *22nd JULY, 2011*  
*Shipping Master PH*

## PARTICULARS OF SEAMAN

SURNAME (In block letters)

DIMGBA

OTHER NAMES (In full)

FESTUS CHINEDU

Date of Birth

2.1.89

Place of Birth

ABA

Height

1.60M

Colour of Eyes

BROWN

Rolled Thumb Print Impressions

Left Thumb

Right Thumb

Signature of Seaman


*[Signature]*



## PARTICULARS OF TRAINING COURSES

(INCLUDING PRE-SEA TRAINING COURSES)

## COURSES ATTENDED AND CERTIFICATES OBTAINED

Date of Courses	Particulars of Courses	Certificates Obtained	Certified signature of Supt. and date
27-03-2020	PERSONAL SURVIVAL TECHNIQUES	(STCW95)	 19-05-2021
27-03-2020	FIRE PREVENTION & FIRE FIGHTING	STCW95	
27-03-2020	ELEMENTARY FIRST AID	STCW95	
27-03-2020	PERSONAL SAFETY & SOCIAL RESPONSIBILITY	STCW95	

## GRADE NUMBER AND DATE OF ISSUE OF CERTIFICATES OF COMPETENCY HELD

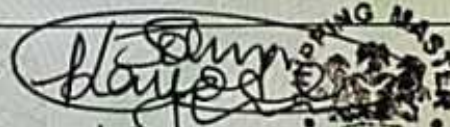
15-05-2015 / SECURITY AWARENESS (ISPS)

## OTHER QUALIFICATIONS:

(N.B. COOK'S CERTIFICATES, EFFICIENT DECK HAND CERTIFICATE, PERSONAL SURVIVAL CERTIFICATE etc.)

(All entries must be certified by a Superintendent of a Seafarers Services Office)

15-05-2015 / SECURITY AWARENESS (ISPS)

  
19-05-2021



## CERTIFICATES OF DISCHARGE

Compiled from lists of Crew and Official Log Book or from other Official Records,  
and copy of Report of Character if desired by the Seaman

No	* Name of Ship Official Number Gross Tonnage Main Engine Kilowatts	Date and place of		* Rating	* Description of voyage**	Copy of Report of Character		Signature of (1) master, and of (2) Shipping Master and official stamp
		Engagement *	Discharge			For ability	For general conduct	
1	MT M/G ALEXANDRA MORONI GN: 35N	18-05-11 LAGOS	24-08-12 LAGOS	Engine Cadet	1 N.C.V	V.G	V.G	(1) [Signature] (2) [Signature]
2	MT M/G ALEXANDRA MORONI GN: 35N	05-05-12 LAGOS	12-06-13 LAGOS	Engine Cadet	2 N.C.V	V.G	V.G	(1) [Signature] (2) [Signature]
3	MT M/G ALEXANDRA MORONI GN: 35N	07/08/2015 ONNE	20/01/2016 ONNE	D/FR	3 FG	V.G	V.G	(1) [Signature] (2) [Signature]
4	MT M/G ALEXANDRA MORONI GN: 35N	08/05/2016 ONNE	10/11/2016 ONNE	D/FR	4 FG	V.G	V.G	(1) [Signature] (2) [Signature]
5	MT M/G ALEXANDRA MORONI GN: 35N	25/2/18 WARRI	12/5/18 WARRI	Engine Cadet	5 FG	VERY GOOD	VERY GOOD	(1) [Signature] (2) [Signature]
6	MT M/G ALEXANDRA MORONI GN: 35N	10-06-18 PHC	17-08-18 WARRI	ENGINE CADET	6 N.C.V	VERY GOOD 1418	VERY GOOD 1418	(1) [Signature] (2) [Signature]

\* These columns are to be filled in at the time of engagement.

\*\* FGN = Foreign Going  
NCV = Near Coastal Voyages



## CERTIFICATES OF DISCHARGE

Compiled from lists of Crew and Official Log Book or from other Official Records,  
and copy of Report of Character if desired by the Seaman

No	Name of Ship Official Number Gross Tonnage Horse Power Kilowatts	Date and place of		* Rating	* Description of voyage**	Copy of Report of Character		Signature of (1) Master and (2) Shipping Master and official stamp
		Engagement *	Discharge			Seaman	Product	
7	ADASSAH - 71 OFF NO: 329894 GRT/NRT: 1333/399 PORT OF REG: LAGOS	13/09/2018 SHELL JETTY Ogunu	15-11-18 WARRI	ENGINE CADET	7 F-G	VERY GOOD 1418	VERY GOOD 1418	(1) (2)
8	ADASSAH - 71 OFF NO: 329894 GRT/NRT: 1333/399 PORT OF REG: LAGOS	21-12-18	21-02-19 WARRI	ENGINE CADET	8 N.C.V	VERY GOOD 1418	VERY GOOD 1418	(1) (2)
9	ADASSAH - 72 OFF NO: 329894 GRT/NRT: 1333/399 PORT OF REG: LAGOS	21-03-19	26-05-19 WARRI	ENGINE CADET	9 N.C.V	VERY GOOD 1418	VERY GOOD 1418	(1) (2)
10	ADASSAH - 71 OFF NO: 329894 GRT/NRT: 1333/399 PORT OF REG: LAGOS	27-06-19	30-08-19 PHC	ENGINE CADET	10 N.C.V	VERY GOOD 1418	VERY GOOD 1418	(1) (2)
11	ADASSAH - 72 OFF NO: 329894 GRT/NRT: 1333/399 PORT OF REG: LAGOS	21/9/19	28/11/19 PHC	ENGINE CADET	11 N.C.V	VERY GOOD 1418	VERY GOOD 1418	(1) (2)
12	ADASSAH - 72 OFF NO: 329894 GRT/NRT: 1333/399 PORT OF REG: LAGOS	26-01-20	29-04-20 WARRI	ENGINE CADET	12 N.C.V	VERY GOOD 1418	VERY GOOD 1418	(1) (2)

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NCV = Near Coastal Voyages



## CERTIFICATES OF DISCHARGE

Compiled from lists of Crew and Official Log Book or from other Official Records,  
and copy of Report of Character if desired by the Seaman

No	Name of Ship Official Number Seaman's Name and Address	Date and place of		* Rating	* Description of voyage**	Copy of Report of Character		Signature of (1) Master and of (2) Shipping Master and official stamp
		Engagement *	Discharge			Reliability	Conduct	
13	GR/NRT: 1333/399 OFF NO: 329894 PORT OF REG: LAGOS	20/06/20 Shell JETTY WARRI	29-08-20 SHELL JETTY WARRI	ENGINE CADET	13 N.C.V	VERY GOOD	VERY GOOD	(1) (2)
14	GR/NRT: 1333/399 OFF NO: 329894 PORT OF REG: LAGOS	22-10-20 NIWAJETTA WARRI	15-01-21 WARRI	ENGINE CADET	14 N.C.V	VERY GOOD	VERY GOOD	(1) (2)
15	GR/NRT: 1333/399 OFF NO: 329894 PORT OF REG: LAGOS	15-03-21 WARRI	13-05-21 WARRI	ENGINE CADET	15 N.C.V	VERY GOOD	VERY GOOD	(1) (2)
16	GR/NRT: 1333/399 OFF NO: 329894 PORT OF REG: LAGOS	18-06-21 LAGOS	20-08-21 LAGOS	DILER	16 N.C.V	VERY GOOD	VERY GOOD	(1) (2)
17	GR/NRT: 1333/399 OFF NO: 329894 PORT OF REG: LAGOS	30-03-22 LAGOS	08-07-22 LAGOS	DILER	17 N.C.V	VERY GOOD	VERY GOOD	(1) (2)
18	GR/NRT: 1333/399 OFF NO: 329894 PORT OF REG: LAGOS	18-09-2022 NIWA JETTY WARRI	23-11-2022 NIWA JETTY WARRI	3RD ENGR.	18 N.C.V	V. GOOD	V. GOOD	(1) (2)






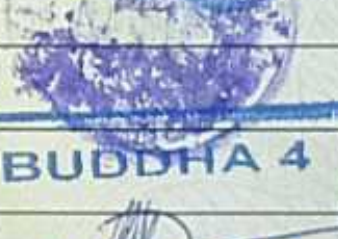
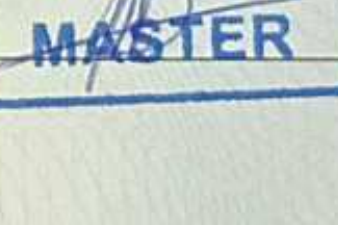
\* These columns are to be filled in at the time of engagement.

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NCV = Near Coastal Voyages



## CERTIFICATES OF DISCHARGE

Compiled from lists of Crew and Official Log Book or from other Official Records,  
and copy of Report of Character if desired by the Seaman

No	* Name of Ship Official Number Gross Tonnage Main Engine Kilowatts	Date and place of		* Rating	* Description of voyage**	Copy of Report of Character		Signature of (1) master, and of (2) Shipping Master and official stamp
		Engagement *	Discharge			For ability	For general conduct	
19	ADASSAH - OFF NO: 329894 GRT/NRT: 1333/399 PORT OF REG: LAGOS	03/12/22	12/04/23	3RD	19	VERY GOOD	VERY GOOD	(1)  (2) 
20	ADASSAH - OFF NO: 329894 GRT/NRT: 1333/399 PORT OF REG: LAGOS	27-05-23	07-09-23	3RD	20	VERY GOOD	VERY GOOD	(1)  (2) 
21	ADASSAH - OFF NO: 329894 GRT/NRT: 1333/399 PORT OF REG: LAGOS	07/10/23	06/01/24	3RD	21	VERY GOOD	VERY GOOD	(1)  (2) 
22	ADASSAH - OFF NO: 329894 GRT/NRT: 1333/399 PORT OF REG: LAGOS	03/02/24	10/05/24	3RD	22	VERY GOOD	VERY GOOD	(1)  (2) 
23	ADASSAH - OFF NO: 329894 GRT/NRT: 1333/399 PORT OF REG: LAGOS	30/05/24	02/08/24	3RD	23	VERY GOOD	VERY GOOD	(1)  (2)
24	BUDDHA 4 IMO NO : 9522477 GRT : 1373 NRT : 411 POR : LAGOS	15/08/24	11/04/25	2ND	24	VERY GOOD	VERY GOOD	(1) BUDDHA 4 (2) MASTER

\* These columns are to be filled in at the time of engagement.

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NCV = Near Coastal Voyages



# WORKPLACE SAFETY NIGERIA LIMITED



KM 15 EAST-WEST ROAD, ODUOHA EMOHUA  
EMOHUA L.G.A. RIVERS STATE.

Tel: 08033364912

<http://www.workplacesafetynig.com>

e-mail: [info@workplacesafetynig.com](mailto:info@workplacesafetynig.com)

This is to certify that:

**DIMGBA FESTUS CHINEDU**

*Has successfully completed all the requirements set forth  
for the award of a certificate in the following*

**HELICOPTER UNDERWATER ESCAPE  
TRAINING INCLUDING SAS**

This certificate acknowledges the commitment to improve on maximizing the  
chances of survival in the event of a ditched helicopter accident, incident or emergency hence  
Workplace Safety Nigeria Limited proudly issue this document  
in recognition of this accomplishment.

Date completed: **APRIL 17TH, 2023**

Certificate No. **WPSN/HUET/2023/3097**

**This certificate is valid for four years only.**

INSTRUCTOR/TRAINER: **FELIX N. NLERUM**

This training course is conducted in  
accordance with OPITO approved standards

Verify certificate at  
[www.workplacesafetynig.com](http://www.workplacesafetynig.com)







# WORKPLACE

SAFETY NIG. LIMITED  
NUPRC/SETC/2022/WORKPLACE/01



This is to certify that:

**DIMGBA FESTUS CHINEDU**

Has Successfully completed all the requirements  
for the issuance of a

# HUET PASS

**CERT. NO. WPSN/HUET/2023/3097**

DATE ISSUED: 17TH APRIL., 2023

EXPIRY DATE: 16TH APRIL., 2027

TRAINER: FELIX N. NLERUM



# Maritime Academy of Nigeria

P. M. B. 1089, Oron, Akwa Ibom State [www.maritimeacademy.gov.ng](http://www.maritimeacademy.gov.ng)

## Certificate of Proficiency in ADVANCED FIRE FIGHTING

No. **044210**

*This is to certify that*

**Dingba Festus Chinedu**  
**2<sup>nd</sup> Jan., 1989**

Born on



has successfully completed an approved training in:

### ADVANCED FIRE FIGHTING

*Regulation VI/3 and Section A-VI/3, Paragraphs 1-4 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers, 1978 (STCW Convention) as amended in 2010.*

This Certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA).

Instructor

Rector



Established by Decree No. 16, of 1989  
(Now CAP M3 LPN 2012)



Original

Holder

**18<sup>th</sup> Feb., 2022**  
Date



# MARITECH INDUSTRIAL AND MANAGEMENT TRAINING ACADEMY

Okorodudu Close off Odibo Avenue, off Effurun Sapele Road Ekerbren, Delta State, Nigeria. Tel: +234-8021122189, 08054722786



MRT/OTF/2897/2024  
Certificate Number

## Certificate of Proficiency in Oil and Chemical Tanker Cargo Operations (BASIC)

This is to certify that

**DIMGBA FESTUS CHINEDU**

Date of Birth: 02/01/1989

Has successfully completed an approved training in:

**Basic Training for Oil and Chemical Tanker Cargo Operation**

In accordance with table A-V/1-1-1 of the STCW convention as amended in 2010.

This certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA).

Signature of Instructor

Issue Date  
22/05/2024

  
Signature of Holder

Email: info@marimared.com | website: www.marimared.com



# Maritime Academy of Nigeria

P. M. B. 1089, Oron, Akwa Ibom State [www.maritimeacademy.gov.ng](http://www.maritimeacademy.gov.ng)

## Certificate of Proficiency in MEDICAL FIRST AID

No: **035981**

*This is to certify that*

**Dingba Festus Chinedu**  
**2<sup>nd</sup> Jan, 1989**

Born on



has successfully completed an approved training in:

### Medical First Aid on Board Ship

Regulation VI/4 and Section A-VI/4, Paragraphs 1-3 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers, 1978 (STCW Convention) as amended in 2010.

This Certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA).

*[Signature]*

Instructor

*[Signature]*  
Rector



Original

*[Signature]*

Holder

**28<sup>th</sup> Jan, 2022**

Date

*\*This Certificate is not valid without the Academy's Official Seal*



# Maritime Academy of Nigeria

P. M. B. 1089, Oron, Akwa Ibom State [www.maritimeacademy.gov.ng](http://www.maritimeacademy.gov.ng)

## Certificate of Proficiency in

### **SURVIVAL CRAFT AND RESCUE BOATS (OTHER THAN FAST RESCUE BOATS)**

No. **135901**

*This is to certify that*

**Dingba Festus Ehinedu**

**2nd Jan, 1989**

Born on



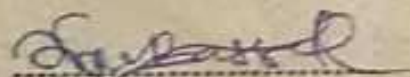
has successfully completed an approved training in:

### **Survival Craft and Rescue Boats (Other than Fast Rescue Boats)**

*Regulation VI/2 and Section A-VI/2, Paragraphs 1-4 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers, 1978 (STCW Convention) as amended in 2010.*

This Certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA)




  
Instructor



  
Holder

**19th Feb, 2021**  
Date

  
Rector



# MARITECH INDUSTRIAL AND MANAGEMENT TRAINING ACADEMY

16 Aladja Avenue, Off Enerhen Road, Effurun, Delta State Nigeria. Tell: +234-8023122189, 08054722786



MRT/HELM/1644/2022  
Certificate Number

**This is to certify that**

**DIMGBA FESTUS CHINEDU**

**Has successfully completed an approved training in:**

**HUMAN ELEMENT, LEADERSHIP AND MANAGEMENT**

In accordance with the IMO Model Course I:39, Column 2 of Tables A-II/1, A-III/1, A-II/2, A-III/2 and A-III/6 of the revised STCW 2010

Signature of Instructor

Issue Date  
20/07/2022

  
Signature of Holder

Email: info@marimared.com | website: www.marimared.com



# MARITECH INDUSTRIAL AND MANAGEMENT TRAINING ACADEMY

16 Aladja Avenue, Off Enerhen Road, Effurun, Delta State Nigeria. Tel: +234-8021122189, 08054722786



MRT/ERRM/1468/2022  
Certificate Number

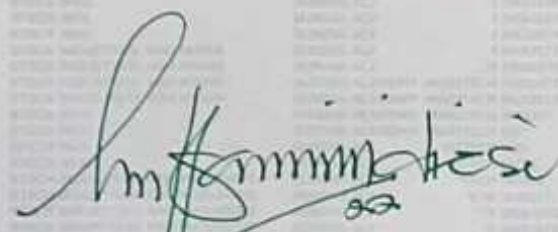
**This is to certify that**

**DIMGBA FESTUS CHINEDU**

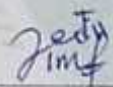
**Has successfully completed an approved training in:**

**ENGINE ROOM RESOURCE MANAGEMENT**

The course is conducted in accordance with guidelines given in the IMO Model Course 2.0.7 (Engine Room Simulator) and fulfills the training requirements for competencies stated in STCW 2010 (Manila Amendments) Part A, Section A-III/1, Table A-III/1 and Section A-III/2 and Table A-III/2

  
Signature of Instructor

Issue Date  
15/07/2022

  
Signature of Holder



Email: info@marimared.com | website: www.marimared.com



# MARITECH INDUSTRIAL AND MANAGEMENT TRAINING ACADEMY

Okorodudu Close off Odibo Avenue, off Effurun Sapele Road Enerhen, Delta State. Tel: +234-8021122189, 08054722786



MRI/MAN/9617/2024  
Certificate Number

## STCW Basic Safety Training

This is to certify that

**DIMGBA FESTUS CHINEDU**

Date of Birth: 02/01/1989


Has successfully completed an approved training in:

### Basic Safety Training

Personal Survival Techniques	Regulation VI/1 and Section A-VI/1, Paragraph 2.1.1
Fire Prevention & Fire Fighting	Regulation VI/1 and Section A-VI/1, Paragraph 2.1.2
Elementary First Aid	Regulation VI/1 and Section A-VI/1, Paragraph 2.1.3
Personal Safety & Social Responsibilities	Regulation VI/1 and Section A-VI/1, Paragraph 2.1.4

of the International Convention on Standards of Training, Certificate and Watchkeeping for Seafarers, (STCW) 1978 code as amended in 2010.

This certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA).

  
Signature of Instructor

Issue Date  
24/05/2024

  
Signature of Holder



Email: info@marimared.com | website: www.marimared.com



# Certificate of Completion

*This certifies that*

**Dimgba Festus Chinedu**

*has successfully completed*

**Hydrogen Sulfide Awareness Training**

And ASC Z390.1, Accepted Practices for Hydrogen Sulfide Safety Training Programs

**In Accordance with OSHA Regulations, 29 CFR 1910 and 1926 and ANSI Standard Z390.1**

Also Known as H2S Training

This course is approved for 2 Contact Hours (.2 CEUs) of continuing education per the California Department of Public Health for Registered Environmental Health Specialist (REHS) (Accreditation # 044)

Safety Unlimited, Inc., Provider #5660170-2, is accredited by the International Association for Continuing Education and Training (IACET) and is accredited to issue the IACET CEU. As an IACET Accredited Provider, Safety Unlimited, Inc. offers CEUs for its programs that qualify under the ANSI/IACET Standard. Safety Unlimited, Inc. is authorized by IACET to offer 0.2 CEUs for this program.

*Julius P. Griggs*

Julius P. Griggs  
Instructor #892

23071561481475

Certificate Number

7/15/2023

Issue Date



Scan this code or visit [safetyunlimited.com/v](https://www.safetyunlimited.com/v) to verify certificate.

Annual Refresher Training Required by ANSI Z390.1



**UNLIMITED, Inc.**  
OSHA Compliant Safety Training Since 1980

2139 Tapo St., Suite 228 Simi Valley, CA 93063  
(855) 784-2677 or 805 306-8027  
<https://www.safetyunlimited.com>



# Maritime Academy of Nigeria

P. M. B. 1089, Oron, Akwa Ibom State [www.maritimeacademy.gov.ng](http://www.maritimeacademy.gov.ng)

## Certificate in INTERNATIONAL SAFETY MANAGEMENT (ISM) CODE

No: **051875**

*This is to certify that*

**Dingba Festus Chinedu**  
**2<sup>nd</sup> Jan., 1989**

Born on



has successfully completed an approved training in:

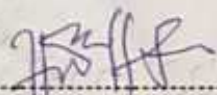
**International Safety Management (ISM) Code**

*in accordance with the requirements of Chapter IX of the International Convention for the Safety of Life at Sea (SOLAS) 1974 as amended.*

This Certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA).



Original

  
Instructor

  
Rector



  
Holder

**1<sup>st</sup> March, 2022**  
Date

*\*This Certificate is not valid without the Academy*



# REGIONAL MARITIME UNIVERSITY

*A branch of the  
World Maritime University,  
Malmö, Sweden*

ACCRA • GHANA



*Member States:  
Cameroon, The Gambia,  
Ghana, Liberia, Sierra Leone*



## CERTIFICATE OF TRAINING

This is to certify that

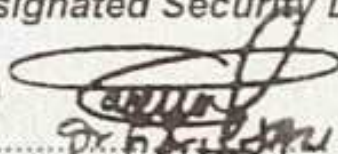
**DIMGBA FESTUS CHINEDU**

Has successfully completed a Training Course in

***Certificate of Proficiency for Seafarers with Security Awareness and Designated Security Duties***

and has met the standard of competence as specified in

  
Registrar

  
Deputy Rector

No. **024149**

**Section A-VI/6, Table A-VI/6-1, Table A-VI/6-2**  
of the Revised STCW Convention (2010)

**15-May-2015**  
Date of Issue

**ISR/00261/15**

ISO 9001 Certified



# Maritime Academy of Nigeria

P. M. B. 1089, Oron, Akwa Ibom State [www.maritimeacademy.gov.ng](http://www.maritimeacademy.gov.ng)

## Certificate of Proficiency as **SHIP SECURITY OFFICER**

No: **15494**

*This is to certify that*

**Dingba Festus Chinedu**

Born on



**2nd Jan, 1989**

has successfully completed an approved training as

## **SHIP SECURITY OFFICER**

in accordance with Regulation VI/5, Section A-VI/5 and Table A-VI/1 of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers, 1978 (STCW Convention) as amended in 2010; and Sections A/2.1.6. and A/12 of the International Ship and Port Facility Security (ISPS) Code.

From

**21st**

to

**22nd Feb, 2012**

This Certificate is issued under the Authority of the Nigerian Maritime Administration and Safety Agency (NIMASA).

*[Signature]*  
Instructor

*[Signature]*  
Recd



Original

*[Signature]*  
Holder





# ENGLISH LANGUAGE TEST FOR SEAFARERS

---

**Dimgba Festus Chinedu**

HAS OBTAINED THE TEST RESULT: **87%**

---

## Test Section Results

Listening	90%
Time and Numbers	80%
Grammar	75%
Vocabulary	91%
Reading	90%

Job Type	Other
Job Title	3rd Engineer
Date of Birth	January 2nd, 1989
Nationality	Nigeria

Test Date	July 23rd, 2023
Company	TOPTOSSAM EMPIRE LIMITED
Test Location	Nigeria
Licence Code	20223C2D1F7BADB0
Completion Time	00:47:39





# FEDERAL REPUBLIC OF NIGERIA

207620

## NIGERIAN MARITIME ADMINISTRATION AND SAFETY AGENCY

### SEAFARER'S MEDICAL CERTIFICATE

**( NIMASA )****ORIGINAL**

This Certificate is issued by the Government of the Federal Republic of Nigeria in compliance with the requirement of Regulation 1.2 standard A 1.2 of the Maritime Labour Convention, 2006 (MLC '06), as amended and the International Convention on Standards for Training, Certification and Watch keeping for seafarers (STCW) 78 as amended.

Surname: <b>DIMGBA</b>	Given Names: <b>FESTUS CHINEDU</b>	
Discharge Book No: <b>SSID NO: NIG031908</b> D D M M Y Y Y Y	Passport No: <b>A11950072</b>	Sex: M <input checked="" type="checkbox"/> F <input type="checkbox"/>
Date of Birth: <b>02011989</b>	Nationality: <b>NIGERIAN</b>	

Department: (Tick relevant box) Deck <input type="checkbox"/> Engine <input checked="" type="checkbox"/> Catering <input type="checkbox"/> Other (specify) _____	Rank: <b>3RD ENGINEER</b>
--	---------------------------

#### Declaration of the recognised doctor

ID checked at the point of examination	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Hearing standards as in STCW A1/9	Yes <input type="checkbox"/> No <input type="checkbox"/>
Visual acuity standards as in STCW A-1/9	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Unaided Hearing satisfactory	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Color vision standards as in STCW A-1/9	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Is there any limitation or restriction on fitness? Please specify restriction.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Date of last colour vision test (dd/mm/yy):	<b>31/01/24</b>		

Visual Aids (tick if worn) Spectacles <input type="checkbox"/> Contact lenses <input type="checkbox"/>
---

Restrictions Duties: <b>N/A</b> Location/Vessel: Medical/Others:
---

Is the seafarer free from any medical condition likely to be aggravated by service at sea or to render the seafarer unfit for such service or to endanger the health of other persons onboard?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
--	---

I have examined the seafarer named above and have found him/her fit for seafaring as below

Medical Fitness Category (tick relevant box) 1. Fit-No Restriction <input checked="" type="checkbox"/> 2. Fit-subject to restrictions <input type="checkbox"/>
---

Fit for look-out duty Fit <input type="checkbox"/> Unfit <input type="checkbox"/>	Deck Fit <input type="checkbox"/> Unfit <input type="checkbox"/>	Engine Fit <input checked="" type="checkbox"/> Unfit <input type="checkbox"/>	Steward/Others Fit <input type="checkbox"/> Unfit <input type="checkbox"/>
--	---	--	---

Date of Examination <b>31012024</b>	Expiry Date of Certificate <b>30012026</b>
-------------------------------------	--

#### Declaration by Seafarer

I have read and understood the notes overleaf and declare that all answers provided are to the best of my knowledge true. I agree that by withholding any information vital to this medical examination will lead to cancellation and withdrawal of this certificate.  
Signature of Seafarer: **[Signature]**

Name, Signature and Official stamp/seal of Approved Doctor

**AKPAKPAN, JOULE**







# NIGERIAN MARITIME ADMINISTRATION AND SAFETY AGENCY

## SEAFARERS' MEDICAL EXAMINATION

### PHYSICIAN'S EXAMINATION REPORT FOR SEAFARERS

UNDER REGULATION 1.2, STANDARD A1.2, OF MLC 2006

Name: DINGBA FESTUS CHIMEDU Discharge Book No. N19031908  
(Surname first)

#### APPEARANCE

HEALTHY

#### GENERAL EXAMINATION

Weight: 60kg Height: 167cm Gait: ☒ Normal ☐ Abnormal  
Temperature: 36.1°C Blood Pressure: 120/80 Pulse Rate: 79/min Pallor: NL  
Palpable ☐ Impalpable ☒ If palpable, state region/location  
Lymph Nodes ☐

#### SYSTEMIC EXAMINATION

	Normal	Abnormal
(1) Central Nervous System	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(2) Cardiovascular System	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(3) Respiratory System	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(4) Gastrointestinal System	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(5) Hernial Orifices	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(6) Endocrine System	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(7) Locomotor System	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(8) Oro-dental	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(9) Skin (including Varicosities)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(10) Ear, Nose & Throat	<input checked="" type="checkbox"/>	<input type="checkbox"/>

#### (3) Eyesight

	RT	LT
Visual Acuity		
Without glasses	<u>6/-6</u>	<u>6/-6</u>
With glasses	<u>6/-</u>	<u>6/-</u>
Colour vision	<input checked="" type="checkbox"/> Normal	<input type="checkbox"/> Abnormal

(1) Blood group & Genotype OF & AS  
POV 43 WBC 8.0 PLT 220  
(2) Full blood count N63 L30 M7 EO 80

	Negative	Positive
(3) VDRL	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(4) HIV	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(5) Hepatitis B Antigen	<input checked="" type="checkbox"/>	<input type="checkbox"/>

(6) Widal (for Catering Dept.) H 20 A 40 B 20 C 20  
(7) Urinalysis Yellow clear pH 6.0 SG 1.030

	Normal	Abnormal
(8) Chest X-Ray with Report	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(9) Electrocardiogram	<input checked="" type="checkbox"/>	<input type="checkbox"/>

#### OTHER EXAMINATIONS

	Normal	Abnormal
(1) Speech (Voice Communication)	<input checked="" type="checkbox"/>	<u>stammered</u>
(2) Hearing	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
- Audiometry	<input type="checkbox"/>	<input type="checkbox"/>

AKPAWAN, J.

Physician's Name

Physician's Signature & Stamp

SAUKE HOSPITAL Wuse

Physician's Address/Telephone No.

08037913019







**FEDERAL REPUBLIC OF NIGERIA**  
**NIGERIAN MARITIME ADMINISTRATION AND SAFETY AGENCY**  
**SEAFARERS' MEDICAL CERTIFICATION APPLICATION FORM**  
UNDER REGULATION 1.2, STANDARD A1.2, OF MLC 2006

**A. APPLICANT'S BIODATA**

SURNAME: DINGBA OTHER NAMES: FESTUS CHINEDU  
DATE OF BIRTH: 02-01-89 AGE: 35 SEX: M NATIONALITY: NIGERIAN  
DATE OF APPLICATION: 30-01-2024 PLACE OF BIRTH: ABA  
Discharge Book NO.: N19031908 Company: \_\_\_\_\_ Vessel: \_\_\_\_\_  
Address: PLOT 116 BAYAZHIN ROAD KUBWA, ABUJA  
DEPT OF SHIP: DECK: ☐ ENGINE: ☒ CATERING: ☐ MASTER/MATE: ☐ OTHERS SPECIFY: \_\_\_\_\_

**B. APPLICANT'S MEDICAL HISTORY (Under guidance from a medical personnel)**

Have you ever had

- |  | YES                      | NO                                  |  | YES                      | NO                                  |
|--|--------------------------|-------------------------------------|--|--------------------------|-------------------------------------|
| (1) Admission to hospital whatever reason at all in the past     | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (16) Sexually Transmitted diseases (Gonorrhea, Syphilis, AIDS etc) | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (2) Any surgical operation                                       | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (17) Any persistent Muscular weakness                              | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (3) Any accident   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (18) Loss of consciousness   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (4) Any mental illness   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (19) Pain in spine, Back or any Joint                              | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (5) Any convulsions  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (20) Balance problem   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (6) Any Ear or Hearing problem                                   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (21) Anal pain or swelling   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (7) Any persistent Cough   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (22) Restricted mobility   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (8) Difficulty with breathing or breathlessness on mild exertion | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (23) Excessive thirst  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (9) Palpitations   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (24) A sign-off as sick or a repatriation from a ship?             | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (10) High blood pressure   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (25) Excessive weight loss   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (11) Chest pain at rest or on exertion                           | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (26) An unfit declaration for sea duty?                            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (12) Stomach pain  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (27) Sugar in the Urine  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (13) Any vomiting  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (28) Your medical certificate restricted or revoked?               | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (14) Blood in vomitus or stool                                   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (29) To wear contact Lens or Glasses                               | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (15) Any problem passing urine                                   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (30) To be placed on any medication                                | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

**2. IMMUNIZATION HISTORY (Have you been immunized before)**

YES	NO	IF YES DATE	YES	NO	IF YES DATE	YES	NO	IF YES DATE	YES	NO	IF YES DATE
(A) Tetanus	<input checked="" type="checkbox"/>	<u>Infancy</u>	(B) Typhoid Fever	<input checked="" type="checkbox"/>	_____	(C) Cholera	<input checked="" type="checkbox"/>	_____	(D) Meningitis	<input checked="" type="checkbox"/>	_____
(E) Yellow Fever	<input checked="" type="checkbox"/>	<u>20/2/22</u>	(F) Hepatitis	<input checked="" type="checkbox"/>	_____	(G) Tuberculosis	<input checked="" type="checkbox"/>	<u>BIRTH</u>			

**3. SOCIAL/FAMILY HISTORY**

- (A) Do you smoke, Take Alcohol or use drugs? YES ☐ NO ☒
- (B) Has any member of your family or relative had mental illness, Epilepsy, Blood disorder, Heart trouble, Hypertension or any other disorder (eg. Allergy etc.) YES ☐ NO ☒
- (C) You have a medical or other condition not mentioned above? YES ☐ NO ☒
- (D) others \_\_\_\_\_

I, \_\_\_\_\_ declare that the information given above is correct to the best of my knowledge. I consent to the examining doctor to endorse my medical information on the Medical fitness Certificate for official purposes (To be signed only in the presence of examining doctor)

31-01-2024  
Date

DINGBA FESTUS CHINEDU  
Name of Applicant

[Signature]  
Signature of Applicant



# COVID-19 VACCINE IS SAFE AND EFFECTIVE

NATIONAL PRIMARY HEALTH CARE  
DEVELOPMENT AGENCY

NG-AB2811593280



Client Copy  
FEDERAL MINISTRY OF HEALTH  
NATIONAL PRIMARY HEALTH CARE  
DEVELOPMENT AGENCY  
COVID-19 Vaccination Card



## Part 1:

### Basic Information

Name: DIMGBA CHINEDU FESTUS Card No. 10.69  
Age: 33 Sex: M  
State: ABIA LGA: ABA SOUTH  
Ward: MOSQUE Settlement: MOSQUE RD  
Health Facility: COLLEGE OF HEALTH  
Name of Vaccinator: SOLOMON ABAY  
Phone No. of LGA DSNO: 08034181053



## Part 2:

### VACCINE DOSE ADMINISTERED & AEFI

COVID-19 Dose	Product Name/Manufacturer Batch Number	Expiry Date	Date Given	Next Appointment	Any AEFI	Date of Onset of AEFI
Dose 1	<ul style="list-style-type: none"> <li>AstraZeneca/Oxford <input checked="" type="checkbox"/></li> <li>Johnson &amp; Johnson <input type="checkbox"/></li> <li>Pfizer <input type="checkbox"/></li> </ul>		<u>26/3/21</u>	<u>26/5/21</u>	<u>NIL</u>	<u>NIL</u>
Dose 2	<ul style="list-style-type: none"> <li>AstraZeneca/Oxford <input checked="" type="checkbox"/></li> <li>Johnson &amp; Johnson <input type="checkbox"/></li> <li>Pfizer <input type="checkbox"/></li> </ul>		<u>26/6/21</u>			
<u>Booster dose</u>			<u>5/10/23</u>			

1st Dose

Name of Health Officer: SOLOMON ABAY

Signature: [Signature]

2nd Dose

Name of Health Officer: SOLOMON ABAY

Signature: [Signature]



FEDERAL REPUBLIC OF NIGERIA

INTERNATIONAL CERTIFICATE  
OF VACCINATION OR PROPHYLAXIS  
CERTIFICAT INTERNATIONAL  
DE VACCINATION OU DE PROPHYLAXIE

Issued to / Délivré à

**DIMGBA FESTUS  
CHINEDU**

Passport No. or Travel Document No.  
Numero du passeport ou de la pièce justificative

**A1 1950072  
NIG031908**




(Scan QR Code to verify) **B716753**

INTERNATIONAL CERTIFICATE OF  
**VACCINATION OR PROPHYLAXIS**

Name of the holder: **DIMGBA FESTUS CHINEDU**

Nationality: **NIGERIAN**

where signature follows: *[Signature]*

against: cause of disease or condition: **YIF**

Vaccine or prophylaxis	Date	Signature and professional status of supervising clinician
<b>YELLOW FEVER</b>	<b>20 JULY 2022</b>	<i>[Signature]</i> <b>PORT HEALTH OFFICER FMOR, NIGERIA CODE: 1142</b>

This certificate is valid only if the vaccine or prophylaxis used has been approved by the World Health Organization.


This certificate must be signed in the hand of the clinician, who shall be a medical practitioner or other authorized health worker, supervising the administration of the vaccine prophylaxis. The certificate must also bear the official stamp of the administering centre, however; this shall not be an accepted substitute for the signature.

**VACCINATION OR PROPHYLAXIS**

Date of birth: **2 JAN, 1959** Sex: **MALE**

National Identification document, if applicable: \_\_\_\_\_

Has on the date indicated been vaccinated or received prophylaxis in accordance with the International Health Regulations: \_\_\_\_\_

Manufacturer and batch No. of vaccine or prophylaxis	Certificate valid from _____ until _____	Official stamp of administering centre
<b>STAMAKIL P.V. NG UBB6214</b>	<b>FOR LIFE</b>	 <i>[Signature]</i>

Any amendment of this certificate, or erasure or failure to complete any part of it, may render it invalid.

The validity of this certificate shall extend until the date indicated for the particular vaccination or prophylaxis. The certificate shall be fully completed in English or in French. The certificate may also be completed in another language on the same document, in addition to either English or French.

**B716753**

OTHER VACCINATIONS - AUTRES VACCINATIONS

Date	Nature of vaccine Genre de vaccin	Dose	Physician's Signature Signature de médecin	Official Signature Fonction Officiel	Stamp Carbet
<b>20 JULY 2022</b>	<b>O.P.V INDIAN SERUM?</b>	<b>Drops</b>	<i>[Signature]</i>	<b>PORT HEALTH OFFICER FMOR, NIGERIA CODE: 1142</b>	





Plot 116 Byazhin Road,  
Kubwa  
Abuja, FCT  
Nigeria.  
08/03/2023

The Director  
Maritime Labour Department  
NIMASA  
4, Burma Road,  
Apapa, Lagos

Dear Sir,

*Registered for Seafarer's  
Registration Status AS  
OFFICER IN CHARGE OF  
ENGINEERING WATCH with Registration  
Number N/EO 2630*

**REQUEST FOR REGISTRATION STATUS AS A SEAFARER**

I, **DIMGBA FESTUS CHINEDU**, of the above mentioned address wish to request for my registration status as a seafarer with your agency.

Attached here are my credentials for your kind perusal.

1. Discharge book number:	NIG - 031908
2. International passport number:	A11950072
3. Date of Birth:	2nd January 1989
4. Rank:	OOW
5. C.O.C Number	007705 Regulation III/1

Thank you for your anticipated response.

Yours Faithfully

*[Signature]*  
**DIMGBA FESTUS CHINEDU**

**08067873861**

*dingba.chinedu@yahoo.com*





# Deep Frontline Shippers Limited

Plot 252, B-Block, Muri Okunola St, Lagos Nigeria.

Email: [info@deepfrontline.com](mailto:info@deepfrontline.com)

## SEA SERVICE TESTIMONIAL

This Is to Certify That **DIMGBA FESTUS CHINEDU** in The Capacity of a **Second Engineer** Under My Command as The Master Carried Out All His Duties and Obligations Throughout His Stay Onboard from **15/08/2024 to 10/04/2025**

### SHIP DETAILS

Name: Buddha 4

Type: DP1 AHTS

Flag: Nigeria

Port of Registry: Lagos

GRT: 1373

NRT: 411

Length Overall: 57.50m

Breadth: 13.80m

IMO NO: 9522477

Call sign: V3MR9

Official Number: 13092812

Length Overall: 57.50m

Breadth: 13.8m

### PERSONAL DATA

NAME: Dimgba Festus Chinedu

RANK: Second Engineer

Seaman Book NO: NIG 031908

PASSPORT NO: A11950072

### ENGINE DETAILS

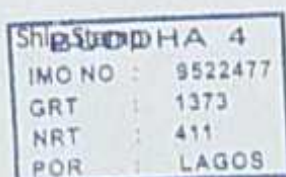
Main Engine: 2xCAT 3516B, 2x2575 BHP @1600rpm

Main Generator: 3xCAT 3406C @320kw/415V/3HP/60HZ

Bow Thruster: 1x440 Tunnel Unit Producing 6T Thrust

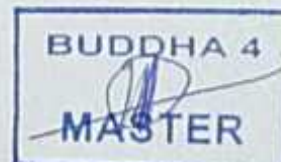
Propulsion: 2xCPP Type w/Kort Nozzle

While Onboard, His Conducts and Behavior Are Well Satisfactory.



Master

Capt. Nathan Ayibalkio





**DELTATEK MARINE SERVICES LIMITED**

DELTATEK MARINE SERVICE LIMITED.

Address: Bay Atlantic Tower,

No 4, Freedom road, Lekki Phase1, Lagos state, Nigeria.

+234 (1) 226 1000

✉ dmsl@deltatek.com

MV HADASSAH T1

**SEA SERVICE TESTIMONIAL**

I certify that the following is full and true statement of the sea going service performed by: **DIMGBA FESTUS CHINEDU** whose passport no: **A11950072** and discharge book no: **NIG 0319087** under my supervision onboard the vessel **MV Hadassah T1** with official IMO no: **9310111** GRT: **1333 tons**, Type of ship: **AHTS**, Power: **3700kw**

PERIODE OF SEA SERVICE		RANK	DESCRIPTION OF MAIN ENGINES AND AUXILIARIES	NATURE OF DUTIES
FROM	TO		<b>MAIN ENGINES</b> 2X MAK 6M 25 @750rpm 1850kw c/w CPP  <b>ELECTRIC MOTORS</b> 2XPT1 MOTORS rated 2000kw (2682bhp) each  <b>COMBINED PROPULSION (HYBRID Model)</b> 6500 KW / 8716 BHP  <b>AUXILIARIES GENERATORS</b> 2XCAT 3408B-DITA@280kw  <b>BOW THRUSTER</b> 1xKaMeWa- Ulstein CPP type 5Tons thrust315 kw (540 Amp) 1480 rpm.  <b>STERN THRUSTERS</b> 2X600KW	
03-12-2022	12-04-2023	3 <sup>rd</sup> Engineer		See below (III)
Report as to Ability: <b>VERY GOOD</b> . Conduct: <b>VERY GOOD</b> . Sobriety: <b>STRICTLY SOBER</b>				

(III) Engine room watch keeping duties, control and participate in the operation of all machineries onboard, effective and timely completion of maintenance and repair activities on deck and in the engine room as assigned or directed, also maintaining a good housekeeping.

During the whole period stated above, **Dimgba Festus Chinedu** was granted **nil day(s)** leave of absence while still on crew agreement.

Name and signature of ship

**HADASSAH**  
OFF NO: 329894  
GRT/NRT: 1333/399  
PORT OF REG: LAGOS



Chief Engineer







DELTATEK MARINE SERVICES LIMITED

MV HADASSAH T2

SEA SERVICE TESTIMONIAL

ADDRESS: Bay Atlantic Tower  
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I certify that the following is full and true statement of the sea going service performed by: **DIMGBA FESTUS CHINEDU** whose passport no: **A11950072** and discharge book no: **NIG 0319087** under my supervision onboard the vessel **MV Hadassah T2** with official IMO no: **9334624** GRT: **1333 tons**, Type of ship: **AHTS**, Power: **3700kw**

Period of Service		Rank of officer and actual seniority onboard	Nature of Duties
FROM	TO		
18-09-2022	23-11-2022	3 <sup>rd</sup> Engineer	Engine room watch keeping duties, control and participate in the operation of all machineries onboard, effective and timely completion of maintenance and repair activities on deck and in the engine room as assigned or directed, while maintaining a good housekeeping.

**MACHINERY \ PROPORTION**

Main Engine	2x Diesel Engine, YANMAR 6N280M-EV (2X2500 BHP@750RPM)
Generators	2x280kw Caterpillar D Engine, 350 KVA
Steering Gear	2x Independent Electro-Hydraulic System
Bow Thruster	1x Ulstein CPP Type 5 Tons Thrust
Shaft Generator	2 x 1000 KW

During the whole period stated above, **Dimgba Festus Chinedu** was granted **nil day(s)** leave of absence while still on crew agreement.

Report as to Ability: **VERY GOOD**. Conduct: **VERY GOOD**. Sobriety: **STRICTLY SOBER**

Name and signature of ship

Captain

Chief Engineer

MV HADASSAH T2  
OFF NO: 329894  
GRT/NRT: 1333/399  
PORT OF REG: LAGOS

