UNITED STATES OF AMERICA U.S. DEPARTMENT OF HOMELAND SECURITY **UNITED STATES COAST GUARD**	
ADDRESS OF COAST GUARD UNIT: U.S. COAST GUARD INVESTIGATING OFFICER: TELEPHONE:	NAME AND ADDRESS OF MARINER: TELEPHONE:
GOOD FAITH DEPOSIT	COAST GUARD ENFORCEMENT ACTIVITY NUMBER:

I, , holder of U.S. Coast Guard issued Merchant Mariner's License number hereby voluntarily deposit said Credential(s) with the U.S. Coast Guard.

I understand I am the subject of an investigation under 46 United States Code 7704 . If I am directed to appear at a hearing before an Administrative Law Judge (ALJ), the Coast Guard will produce the Credential(s) at the hearing. If the Coast Guard does not issue a complaint against me, my Credential(s) will be returned to me.

I also understand if a suspension of my Credential is ordered by the Administration Law Judge, the Coast Guard will recommend the ALJ credit the time the Credential has been on deposit toward any such suspension. The Coast Guard has advised me that the ALJ is not bound by this agreement and may not accept the Coast Guard's recommendation.

I agree that during the period my Credential(s) is/are held by the Coast Guard I will not perform any function that requires a Coast Guard issued Credential.

I further agree that I will not make application to the U.S. Coast Guard for the renewal, issue, or reissue of any Merchant Mariner's Document, License or Certificate of Registry, without stating on such application that this agreement is in effect.

I enter into this agreement freely and voluntarily and I fully understand its meaning and effect.

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Signature of Respondent

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U.S. Coast Guard Merchant Mariner's License Number received in accordance with the above deposit this day of December , 200 , by the U.S. Coast Guard Activities
, .

Signed_____ _____
Investigating Officer for the United States Coast Guard Type or print name

ORIGINAL—Respondent
COPY—Marine Safety Office

Reset