

DEPARTMENT OF HOMELAND SECURITY  
U.S. Customs and Border Protection

OMB 1651-0103  
Expires 08/31/2016

**PASSENGER LIST - CREW LIST**

*Prior to arrival in the United States, complete a separate form for a) working crew; and b) passengers and supernumeraries. In addition to its initial completion, the crew list shall be updated to reflect crew changes and other relevant activity (or lack thereof) until the vessel departs the United States.*

Vessel Name: \_\_\_\_\_ Nationality: \_\_\_\_\_ Official Number: \_\_\_\_\_

Last Foreign Port (Place and Country): \_\_\_\_\_ Date Sailed from Foreign Port: \_\_\_\_\_ Date of Arrival in U.S.: \_\_\_\_\_ Arrival Port: \_\_\_\_\_

No. of Crew (including Master): \_\_\_\_\_ No. of Passengers: \_\_\_\_\_ Agent at Arrival (Name & Address): \_\_\_\_\_

Will crew perform longshore work while vessel is in the United States?  NO  YES (Provide applicable INA Section 258 Exemption): \_\_\_\_\_

**PROPOSED ITINERARY**

Next U.S. Port(s)	Arrival Date	Vessel Agent (Name and Address)

PASSENGER LIST  CREW LIST Page 1 of \_\_\_\_\_

List individuals alphabetically. Crew who join the vessel subsequent to its arrival while in the United States must be added to the original list and the appropriate date recorded in the "Date Joined" column. The "Date Separated" column must be used when a listed crewman is separated from the vessel while it is in the United States. Any crewman designated as "REFUSED" in the "DHS Use Only" column is to be detained on the vessel at all times.

Family Name	First Name & Initial	Date of Birth	Nationality/ Document #	Position or Title (Crew Only)	Date Joined (Crew Only)	Date Separated (Crew Only)	Inspection Status (DHS Use Only) <i>Checked box indicates subsequent parole.</i>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>

**RECEIPT FOR CREW LIST (CBP Use Only).** I-418 Receipt Number at right indicates that the U.S. Customs and Border Protection (CBP) has received the CREW LIST containing the names of all members of crew, including Master, on board said vessel at time of its arrival.

I-418 Receipt Number (POE - YYMMDD - Badge # - Military Time):  
\_\_\_\_\_

CBP Port of Arrival (address): \_\_\_\_\_

**SUMMARY OF DEPARTURE.** Vessel Agent (at Departure): Following this vessel's departure from the United States, ensure that crew list reflects all crew additions and separations and is promptly submitted to the U.S. Customs and Border Protection office at the port of departure. Summarize the departure circumstances by providing the following information:

Date of Departure: \_\_\_\_\_ Port of Departure: \_\_\_\_\_

Agent at Departure (Name & Address): \_\_\_\_\_ Total Added Crew: \_\_\_\_\_ Total Separated Crew: \_\_\_\_\_

**MASTER'S CERTIFICATION**

**MASTER:** Execute the following oath before a U.S. Customs and Border Protection Officer as to all arriving passengers on all vessels and all departing crew on United States Flag Vessels, and before an CBP Officer authorized to administer oaths as to all departing passengers on vessels:

*I certify that the U.S. Customs and Border Protection baggage declaration requirements have been made known to incoming passengers; that any required CBP baggage declarations have been or will simultaneously herewith be filed as required by law and regulation with the proper CBP Officer; and that the responsibilities devolving upon this vessel in connection therewith, if any, have been or will be discharged as required by law or regulation before the proper CBP Officer. I further certify that there are no steerage passengers on board this vessel (46 U.S.C. 151-163).*

Signature of Master: \_\_\_\_\_

**CERTIFICATION OF COPY OF CREW LIST OF UNITED STATES FLAG VESSEL**

I certify that this is a true copy of the original crew list of the named American vessel, which original crew list is on file in this office. Given under my hand and seal of office at the customhouse at

\_\_\_\_\_ on \_\_\_\_\_.

Signature of CBP Officer: \_\_\_\_\_

**PASSENGER LIST - CREW LIST - Continuation Sheet**      Page \_\_\_\_\_ of \_\_\_\_\_

**Vessel Name:** \_\_\_\_\_      **Arrival Port in U.S.:** \_\_\_\_\_      **Arrival Date:** \_\_\_\_\_

Family Name	First Name & Initial	Date of Birth	Nationality/ Document #	Position or Title <i>(Crew Only)</i>	Date Joined <i>(Crew Only)</i>	Date Separated <i>(Crew Only)</i>	Inspection Status <b>(DHS Use Only)</b> <i>Checked box indicates subsequent parole.</i>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>

I-418 Receipt Number (DHS Use Only) \_\_\_\_\_

**PASSENGER LIST - CREW LIST - Continuation Sheet**

Vessel Name: \_\_\_\_\_ Arrival Port in U.S.: \_\_\_\_\_ Arrival Date: \_\_\_\_\_

<b>Family Name</b>	<b>First Name &amp; Initial</b>	<b>Date of Birth</b>	<b>Nationality/ Document #</b>	<b>Position or Title <i>(Crew Only)</i></b>	<b>Date Joined <i>(Crew Only)</i></b>	<b>Date Separated <i>(Crew Only)</i></b>	<b>Inspection Status (DHS Use Only)</b> <i>Checked box indicates subsequent parole.</i>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>

# PASSENGER LIST - CREW LIST

## INSTRUCTIONS

### ALL NAMES AND OTHER DATA INSCRIBED ON THIS FORM MUST BE IN THE ENGLISH LANGUAGE

**PASSENGERS:** Deliver one complete alphabetical passenger list, regardless of nationality, to United States Public Health Service, and three such lists to the United States Customs and Border Protection, on arrival at first port in the United States.

**CREW LIST VISA APPLICATION:** Submit form in duplicate to U.S. consular officer, specifying each alien crewman not in possession of a valid individual visa or lawful resident alien card.

**ARRIVING CREW:** Deliver one complete alphabetical crew list, regardless of nationality, to United States Public Health Service, and three such lists to the United States Customs and Border Protection on arrival at first port in the United States. Where a crewman is a returning resident, show his/her alien registration receipt number where prompted for a document number.

**CHANGES IN CREW:** If an alien crewman is separating from the vessel while in the United States (and will not be returning), discharge authorization must first be obtained from the United States Customs and Border Protection via Form I-408 (Application to Pay Off or Discharge Alien Crewman) and the appropriate date of separation must be recorded in the "Date Separated" column of this form for that crew member. If a crew member joins the vessel while in the United States, add the crewman's name and other requested information at the next available blank line of the list and record the appropriate date in the "Date Joined" column.

**DEPARTING CREW:** When the vessel departs the United States, complete the SUMMARY OF DEPARTURE section and deliver one complete list (whether or not there have been crew changes) to the United States Customs and Border Protection at the port of departure.

Paperwork Reduction Act Statement: An agency may not conduct or sponsor an information collection and a person is not required to respond to this information unless it displays a current valid OMB control number and an expiration date. The control number for this collection is 1651-0103. The estimated average time to complete this application is 1 hour. If you have any comments regarding the burden estimate you can write to U.S. Customs and Border Protection, Office of Regulations and Rulings, 90 K Street, NE, 10th Floor, Washington DC 20229.