

## Application Form for Unrestricted Towage Licence

Under the Port Safety Operating Licence (PSOL) issued to Port Authority of New South Wales, Port Authority is to promote the provision of safe and efficient towage services.

To maintain an appropriate and sufficiently high standard of towage services, Port Authority administers a towage licence system for the ports of Sydney Harbour, Port Kembla, Botany Bay, Eden and Newcastle and requires vessels requiring towage services to exclusively utilise towage providers who have been issued with a towage licence from Port Authority of New South Wales.

All licences with the ports of Sydney Harbour, Botany Bay, Port Kembla, Eden and Newcastle are non-exclusive.

### UNRESTRICTED LICENCE APPLICATION / UNRESTRICTED LICENCE RENEWAL APPLICATION

The Applicant seeks to apply for an Unrestricted Towage Licence / Unrestricted Towage Licence Extension by submitting the documents required which satisfy the Current Eligibility Criteria listed in Schedule 1, and this Application which together form a complete application.

Only those applications submitted in which all required supporting documentation is supplied will be considered a complete application by Port Authority. Applications can be submitted electronically to: [towage@portauthoritiesnsw.com.au](mailto:towage@portauthoritiesnsw.com.au)

The period of time for assessment by Port Authority of a complete application will be approximately 4 weeks.

The Applicant: (Towage service provider)	
Towage Licence Expiry: (if renewal)	
Current Towage Licence Number: (if renewal)	
Ports for which the Applicant seeks a Towage Licence:	<input type="checkbox"/> Sydney Harbour <input type="checkbox"/> Eden <input type="checkbox"/> Botany Bay <input type="checkbox"/> Port Kembla <input type="checkbox"/> Newcastle
Nominated Initial Commencement Date of Licence (please specify a date between one and four months after application date)	
Nominated commercial contact person and contact details:	
Designated Person Ashore and contact details:	

## Applicant's lodgement

By submitting this form,

- (i) I agree that Port Authority is collecting my personal information for the purpose of handling my application for a towage licence and if I do not provide all the necessary information my request may not be processed;
- (ii) I acknowledge that the personal information I have disclosed will be handled in accordance with Port Authority of NSW's Privacy Statement located [here](#); and
- (iii) I may request access to my information at any time by contacting the Privacy Coordinator on [access2info@portauthoritynsw.com.au](mailto:access2info@portauthoritynsw.com.au) or (02) 9296 4999.

Signature of Applicant: .....

Printed Name & Date: .....

## SCHEDULE 1

### ELIGIBILITY CRITERIA – SYDNEY HARBOUR (UNRESTRICTED)

Please check the boxes below to indicate the required documentation has been provided (hard copy or electronic form) in support of your application:

<b>Fleet</b>	
Name, age, specification and survey certification of the proposed Minimum Tug Fleet	<input type="checkbox"/>
Name, age, specification, survey certification and home port of nominated Back Up Tug	<input type="checkbox"/>
Name, age, specification and survey certification for any other tug intended to be stationed and/or deployed in Sydney Harbour	<input type="checkbox"/>
<b>Crew training &amp; certification</b>	
Name, evidence of qualification and relevant towing experience of each tug master including their Master's Certificate Number and a copy of their current Certificate of Local Knowledge	<input type="checkbox"/>
Outline of the Applicant's proposed training, compliance and crew competency checking program, including emergency response training	<input type="checkbox"/>
<b>Certificate of operation (COO)</b>	
Copy of each applicable AMSA Certificate of Operation (for Domestic Commercial Vessels)	<input type="checkbox"/>
<b>Safety management system (SMS)</b>	
Overview of Applicant's Safety Management System (compliant with Marine Order 504)	<input type="checkbox"/>
<b>Safety &amp; environmental performance</b>	
Information in regard to any regulatory safety & environmental breach including PIN notices and prosecutions in the last 10 years	<input type="checkbox"/>
<b>Bollard pull certification</b>	
Copies of Class accredited bollard pull certification for each tug (not more than 5 years old)	<input type="checkbox"/>
<b>Communications system</b>	
Confirmation of 24 hour contact details and communication / booking system to be used by the Licensee	<input type="checkbox"/>
<b>Insurances</b>	
Copies of relevant Public Liability and Worker's Compensation Certificates of Currency	<input type="checkbox"/>
<b>Compliance with towing licence/s</b>	
Information on where the Applicant holds other harbour towing licences or concessions in Australia and any formally recorded breach of their obligations under those arrangements in the last 10 years	<input type="checkbox"/>

## ELIGIBILITY CRITERIA – PORT BOTANY (UNRESTRICTED)

Please check the boxes below to indicate the required documentation has been provided (hard copy or electronic form) in support of your application:

<b>Fleet</b>	
Name, age, specification and survey certification of the proposed Minimum Tug Fleet	<input type="checkbox"/>
Name, age, specification, survey certification and home port of nominated Back Up Tug	<input type="checkbox"/>
Name, age, specification and Class 2B survey certification of the Ocean Towing Tug, including details of emergency towing arrangement and confirmation it is in full working order	<input type="checkbox"/>
Name, age, specification and survey certification for any other tug intended to be stationed and/or deployed in Port Botany	<input type="checkbox"/>
<b>Crew training &amp; certification</b>	
Name, evidence of qualification and relevant towage experience of each tug master including their Master's Certificate Number and a copy of their current Certificate of Local Knowledge	<input type="checkbox"/>
Outline of the Applicant's proposed training, compliance and crew competency checking program, including emergency response training	<input type="checkbox"/>
<b>Certificate of operation (COO)</b>	
Copy of each applicable AMSA Certificate of Operation (for Domestic Commercial Vessels)	<input type="checkbox"/>
<b>Safety management system (SMS)</b>	
Overview of Applicant's Safety Management System (compliant with Marine Order 504)	<input type="checkbox"/>
<b>Safety &amp; environmental performance</b>	
Information in regard to any regulatory safety & environmental breach including PIN notices and prosecutions in the last 10 years	<input type="checkbox"/>
<b>Bollard pull certification</b>	
Copies of Class accredited bollard pull certification for each tug (not more than 5 years old)	<input type="checkbox"/>
<b>Communications system</b>	
Confirmation of 24 hour contact details and communication / booking system to be used by the Licensee	<input type="checkbox"/>
<b>Insurances</b>	
Copies of relevant Public Liability and Worker's Compensation Certificates of Currency	<input type="checkbox"/>
<b>Compliance with towage licence/s</b>	
Information on where the Applicant holds other harbour towage licences or concessions in Australia and any formally recorded breach of their obligations under those arrangements in the last 10 years	<input type="checkbox"/>

## ELIGIBILITY CRITERIA – Newcastle (UNRESTRICTED)

Please check the boxes below to indicate the required documentation has been provided (hard copy or electronic form) in support of your application:

<b>Fleet</b>	
Name, age, specification and survey certification of the proposed Minimum Tug Fleet	<input type="checkbox"/>
Name, age, specification, survey certification and home port of nominated Back Up Tug	<input type="checkbox"/>
Name, age, specification and Class 2B survey certification of the Ocean Towing Tug, including details of emergency towing arrangement and confirmation it is in full working order	<input type="checkbox"/>
Name, age, specification and survey certification for any other tug intended to be stationed and/or deployed in Newcastle	<input type="checkbox"/>
<b>Crew training &amp; certification</b>	
Name, evidence of qualification and relevant towage experience of each tug master including their Master's Certificate Number and a copy of their current Certificate of Local Knowledge	<input type="checkbox"/>
Outline of the Applicant's proposed training, compliance and crew competency checking program, including emergency response training	<input type="checkbox"/>
<b>Certificate of operation (COO)</b>	
Copy of each applicable AMSA Certificate of Operation (for Domestic Commercial Vessels)	<input type="checkbox"/>
<b>Safety management system (SMS)</b>	
Overview of Applicant's Safety Management System (compliant with Marine Order 504)	<input type="checkbox"/>
<b>Safety &amp; environmental performance</b>	
Information in regard to any regulatory safety & environmental breach including PIN notices and prosecutions in the last 10 years	<input type="checkbox"/>
<b>Bollard pull certification</b>	
Copies of Class accredited bollard pull certification for each tug (not more than 5 years old)	<input type="checkbox"/>
<b>Communications system</b>	
Confirmation of 24-hour contact details and communication / booking system to be used by the Licensee	<input type="checkbox"/>
<b>Insurances</b>	
Copies of relevant Public Liability and Worker's Compensation Certificates of Currency	<input type="checkbox"/>
<b>Compliance with towage licence/s</b>	
Information on where the Applicant holds other harbour towage licences or concessions in Australia and any formally recorded breach of their obligations under those arrangements in the last 10 years	<input type="checkbox"/>

## ELIGIBILITY CRITERIA – Port Kembla (UNRESTRICTED)

Please check the boxes below to indicate the required documentation has been provided (hard copy or electronic form) in support of your application:

<b>Fleet</b>	
Name, age, specification and survey certification of the proposed Minimum Tug Fleet	<input type="checkbox"/>
Name, age, specification, survey certification and home port of nominated Back Up Tug	<input type="checkbox"/>
Name, age, specification and survey certification for any other tug intended to be stationed and/or deployed in Port Kembla	<input type="checkbox"/>
<b>Crew training &amp; certification</b>	
Name, evidence of qualification and relevant towing experience of each tug master including their Master's Certificate Number and a copy of their current Certificate of Local Knowledge	<input type="checkbox"/>
Outline of the Applicant's proposed training, compliance and crew competency checking program, including emergency response training	<input type="checkbox"/>
<b>Certificate of operation (COO)</b>	
Copy of each applicable AMSA Certificate of Operation (for Domestic Commercial Vessels)	<input type="checkbox"/>
<b>Safety management system (SMS)</b>	
Overview of Applicant's Safety Management System (compliant with Marine Order 504)	<input type="checkbox"/>
<b>Safety &amp; environmental performance</b>	
Information in regard to any regulatory safety & environmental breach including PIN notices and prosecutions in the last 10 years	<input type="checkbox"/>
<b>Bollard pull certification</b>	
Copies of Class accredited bollard pull certification for each tug (not more than 5 years old)	<input type="checkbox"/>
<b>Communications system</b>	
Confirmation of 24 hour contact details and communication / booking system to be used by the Licensee	<input type="checkbox"/>
<b>Insurances</b>	
Copies of relevant Public Liability and Worker's Compensation Certificates of Currency	<input type="checkbox"/>
<b>Compliance with towing licence/s</b>	
Information on where the Applicant holds other harbour towing licences or concessions in Australia and any formally recorded breach of their obligations under those arrangements in the last 10 years	<input type="checkbox"/>

## ELIGIBILITY CRITERIA – EDEN (UNRESTRICTED)

Please check the boxes below to indicate the required documentation has been provided (hard copy or electronic form) in support of your application:

<b>Fleet</b>	
Name, age, specification and survey certification of the proposed Minimum Tug Fleet	<input type="checkbox"/>
Name, age, specification, survey certification and home port of nominated Back Up Tug	<input type="checkbox"/>
Name, age, specification and survey certification for any other tug intended to be stationed and/or deployed in Eden	<input type="checkbox"/>
<b>Crew training &amp; certification</b>	
Name, evidence of qualification and relevant towing experience of each tug master including their Master's Certificate Number and a copy of their current Certificate of Local Knowledge	<input type="checkbox"/>
Outline of the Applicant's proposed training, compliance and crew competency checking program, including emergency response training	<input type="checkbox"/>
<b>Certificate of operation (COO)</b>	
Copy of each applicable AMSA Certificate of Operation (for Domestic Commercial Vessels)	<input type="checkbox"/>
<b>Safety management system (SMS)</b>	
Overview of Applicant's Safety Management System (compliant with Marine Order 504)	<input type="checkbox"/>
<b>Safety &amp; environmental performance</b>	
Information in regard to any regulatory safety & environmental breach including PIN notices and prosecutions in the last 10 years	<input type="checkbox"/>
<b>Bollard pull certification</b>	
Copies of Class accredited bollard pull certification for each tug (not more than 5 years old)	<input type="checkbox"/>
<b>Communications system</b>	
Confirmation of 24 hour contact details and communication / booking system to be used by the Licensee	<input type="checkbox"/>
<b>Insurances</b>	
Copies of relevant Public Liability and Worker's Compensation Certificates of Currency	<input type="checkbox"/>
<b>Compliance with towing licence/s</b>	
Information on where the Applicant holds other harbour towing licences or concessions in Australia and any formally recorded breach of their obligations under those arrangements in the last 10 years	<input type="checkbox"/>